

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE*

*Other In-
structions on
reverse side)

Form approved
Budget Bureau No. 1004-0137
Expires August 31, 1985

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other _____
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEPEN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____

2. NAME OF OPERATOR
Petroglyph Operating Company, Inc.

3. ADDRESS OF OPERATOR
P. O. Box 1839, Hutchinson, KS 67504-1839

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)
At surface 2527' FSL & 612' FWL, NW SW
At top prod. interval reported below
At total depth 6160' RTD

14. PERMIT NO. 43-013-31713 DATE ISSUED _____

5. LEASE DESIGNATION AND SERIAL NO.
14-20-H62-4633

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Ute Indian Tribe

7. UNIT AGREEMENT NAME
14-20-H62-4650

8. FARM OR LEASE NAME
Ute Tribal

9. WELL NO.
17-12

10. FIELD AND POOL, OR WILDCAT
Antelope Creek

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA
Sec 17-T5S-R3W

12. COUNTY OR PARISH
Duchesne

13. STATE
Utah

15. DATE SPUDDED 10-8-96 16. DATE T.D. REACHED 10-15-96 17. DATE COMPL. (Ready to prod.) 11-11-96 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6082.1' 19. ELEV. CASINGHEAD _____

20. TOTAL DEPTH, MD & TVD 6160' 21. PLUG BACK T.D., MD & TVD 5836' 22. IF MULTIPLE COMPL. HOW MANY* _____ 23. INTERVALS DRILLED BY _____ ROTARY TOOLS _____ CABLE TOOLS _____

24. PRODUCING INTERVAL(S). OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
Green River

25. WAS DIRECTIONAL SURVEY MADE _____

26. TYPE ELECTRIC AND OTHER LOGS RUN
CNL, AIT 11-20-96

27. WAS WELL CORED _____

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8	24#	412	12-1/4	250 sx Type 5 & 2% CaCl ₂	
5-1/2	15.5#	5866	7-7/8	85 sx Mod Hifill & 320 sx G	

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-7/8	5532	

31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
		DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
5498-5502	(17 shots)	5486-5502	4000 gal fluid, 13100# prop
5486-90	(17 shots)	4970-73	4000 gal fluid, 13800# prop
4970-73	(13 shots)	4692-96	4000 gal fluid, 13300# prop
4692-96	(17 shots)		

33.* PRODUCTION

DATE FIRST PRODUCTION 12-25-96 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) pumping, 2-1/2 x 1-1/2 x 16 40 ring PA WELL STATUS (Producing or shut-in) producing

DATE OF TEST 1-2-97 HOURS TESTED 24 CHOKE SIZE _____ PROD'N. FOR TEST PERIOD _____ OIL—BBL. 47 GAS—MCF. 40 WATER—BBL. 23 GAS-OIL RATIO _____

FLOW. TUBING PRESS. _____ CASING PRESSURE 1100 CALCULATED 24-HOUR RATE _____ OIL—BBL. _____ GAS—MCF. _____ WATER—BBL. _____ OIL GRAVITY-API (CORR.) _____

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)
sold; used for fuel

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED Alma S. Baluck TITLE Production Analyst

TEST WITNESSED BY Page Schenker
DATE 1-10-97

*(See Instructions and Spaces for Additional Data on Reverse Side) DIV. OF OIL, GAS & MINING

37. SUMMARY OF POROUS ZONES: (Show all important zones of porosity and contents thereof; cored intervals; and all drill-stem, tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries):

38.

GEOLOGIC MARKERS

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
X Marker	3855					
Douglas Creek	4488					
B Limestone	4874					
Castle Peak	5432					
Basal Carbonate	5842					

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

FORM 9

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.

1. TYPE OF WELL OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER _____		5. LEASE DESIGNATION AND SERIAL NUMBER: 1420H624650
2. NAME OF OPERATOR: Petroglyph Operating Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: Ute Indian Tribe
3. ADDRESS OF OPERATOR: P.O. Box 607 CITY Roosevelt STATE UT ZIP 84066		7. UNIT or CA AGREEMENT NAME: Ute Tribal 18-01
4. LOCATION OF WELL FOOTAGES AT SURFACE: Multiple/See Below		8. WELL NAME and NUMBER: See Below
QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN:		9. API NUMBER: See Below
		10. FIELD AND POOL, OR WILDCAT: Antelope Creek
		COUNTY: Duchesne
		STATE: UT
		UTAH

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION		
<input type="checkbox"/> NOTICE OF INTENT (Submit in Duplicate) Approximate date work will start: _____	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> DEEPEN	<input type="checkbox"/> REPERFORATE CURRENT FORMATION
	<input type="checkbox"/> ALTER CASING	<input type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> SIDETRACK TO REPAIR WELL
	<input type="checkbox"/> CASING REPAIR	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> TEMPORARILY ABANDON
	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> TUBING REPAIR
	<input type="checkbox"/> CHANGE TUBING	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> VENT OR FLARE
<input checked="" type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only) Date of work completion: _____	<input type="checkbox"/> CHANGE WELL NAME	<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> WATER DISPOSAL
	<input type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> PRODUCTION (START/RESUME)	<input type="checkbox"/> WATER SHUT-OFF
	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input checked="" type="checkbox"/> OTHER: Facility Changes
	<input type="checkbox"/> CONVERT WELL TYPE	<input type="checkbox"/> RECOMPLETE - DIFFERENT FORMATION	

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

Well Name	API#	S/T/R	Type	Status	Entity#
Ute 17-04	430133146400S1	17/05S/03W	Oil	POW	12088
Ute 17-05	430133167400S1	17/05S/03W	Oil	POW	12088
Ute 17-12	430133171300S1	17/05S/03W	Oil	POW	12088
Ute 18-06	430133178100S1	18/05S/03W	Oil	POW	09387
Ute 18-12	430133178300S1	18/05S/03W	Oil	POW	09387

All wells were moved to the Ute Tribal 18-01 Tank Battery.

Ute 18-01	Oil	POW	12245
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NAME (PLEASE PRINT) Callie Peatross

TITLE Production Clerk

SIGNATURE

Callie Peatross

DATE 04-25-03

(This space for State use only)

RECEIVED

APR 28 2003

(5/2000)

(See Instructions on Reverse Side)

STATE OF OIL, GAS & MINING

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

FORM 9

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.

1. TYPE OF WELL OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER _____		5. LEASE DESIGNATION AND SERIAL NUMBER: 1420H624633
2. NAME OF OPERATOR: PETROGLYPH		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: UTE TRIBE
3. ADDRESS OF OPERATOR: BOX 607 CITY ROOSEVELT STATE UT ZIP 84066		7. UNIT or CA AGREEMENT NAME:
4. LOCATION OF WELL FOOTAGES AT SURFACE: 2527' FSL 612' FWL		8. WELL NAME and NUMBER: UTE TRIBAL 17-12
QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: NWSW 17 5S 3W		9. API NUMBER: 4301331713
COUNTY: DUCHESNE		10. FIELD AND POOL, OR WLDGAT: ANTELOPE CREEK
STATE: UTAH		

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION		
<input checked="" type="checkbox"/> NOTICE OF INTENT (Submit in Duplicate) Approximate date work will start: 10/1/2010	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> DEEPEN	<input checked="" type="checkbox"/> REPERFORATE CURRENT FORMATION
<input type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only) Date of work completion:	<input type="checkbox"/> ALTER CASING	<input checked="" type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> SIDETRACK TO REPAIR WELL
	<input type="checkbox"/> CASING REPAIR	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> TEMPORARILY ABANDON
	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> TUBING REPAIR
	<input type="checkbox"/> CHANGE TUBING	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> VENT OR FLARE
	<input type="checkbox"/> CHANGE WELL NAME	<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> WATER DISPOSAL
	<input type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> PRODUCTION (START/RESUME)	<input type="checkbox"/> WATER SHUT-OFF
	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input type="checkbox"/> OTHER: _____
	<input type="checkbox"/> CONVERT WELL TYPE	<input type="checkbox"/> RECOMPLETE - DIFFERENT FORMATION	

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

SUBSEQUENT ANALYSIS OF FORMATION POSSIBILITIES IN THIS TA WELL HAVE LED PETROGLYPH TO BELIEVE THERE MAY BE SOME CHANCE OF FURTHER SUCCESSFUL DEVELOPEMENT. THEREFORE PETROGLYPH INTENDS TO BEGIN PERF. AND SAND FRAC. OF UPPER ZONES IN THIS WELL ON OR ABOUT 10/1/2010 IN FOLLOWING ZONES: B6&4040-4054' AND B10@ AND B11@4296'-4304' AND C3.2@4466'-4482' AND RETURN WELL TO PRODUCTION ON OR ABOUT 10/7/2010

VERBAL APPROVAL BY DENNIS INGRAM AS PER PHONE CONVERSATION 9/17/2010

COPY SENT TO OPERATOR

Date: 9-29-2010
Initials: KS

NAME (PLEASE PRINT) BOYD COOK	TITLE RIG REP
SIGNATURE <i>B. Cook</i>	DATE 9/17/2010

(This space for State use only)

Accepted by the
Division of
Oil, Gas and Mining

Federal Approval Of This
Action Is Necessary

(See Instructions on Reverse Side)

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SEP 20 2010

DIV. OF OIL, GAS & MINING

9/28/10
* Cause 214-02

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

AMENDED REPORT ☐ FORM 8
(highlight changes)

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. TYPE OF WELL: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER RE-COMPLETION		5. LEASE DESIGNATION AND SERIAL NUMBER: 1420H624633
b. TYPE OF WORK: NEW WELL <input type="checkbox"/> HORIZ. LATS. <input type="checkbox"/> DEEP-EN <input type="checkbox"/> RE-ENTRY <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> OTHER _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: UTE TRIBE
2. NAME OF OPERATOR: PETROGLYPH		7. UNIT or CA AGREEMENT NAME: 1420H624650
3. ADDRESS OF OPERATOR: BOX 607 CITY ROOSEVELT STATE UT ZIP 84066		8. WELL NAME and NUMBER: UTE TRIBAL 17-12
4. LOCATION OF WELL (FOOTAGES) AT SURFACE: 2527' FSL 612' FWL AT TOP PRODUCING INTERVAL REPORTED BELOW: SAME AT TOTAL DEPTH: SAME		9. API NUMBER: 4301331713
10. FIELD AND POOL, OR WILDCAT: ANTELOPE CREEK		11. QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: NWSW 17 5S 3W
12. COUNTY: DUCHESNE		13. STATE: UTAH

14. DATE SPURRED: 10/8/1996	15. DATE T.D. REACHED: 10/15/1996	16. DATE COMPLETED: 11/11/1996 10/28/2010	17. ELEVATIONS (DF, RKB, RT, GL): 6092 RKB
18. TOTAL DEPTH: MD 6,160 TVD 6,160		19. PLUG BACK T.D.: MD 5,836 TVD 5,836	20. IF MULTIPLE COMPLETIONS, HOW MANY? * ABANDONED <input type="checkbox"/> READY TO PRODUCE <input checked="" type="checkbox"/>
21. DEPTH BRIDGE MD 4,650 PLUG SET: TVD 4,650		22. TYPE ELECTRIC AND OTHER MECHANICAL LOGS RUN (Submit copy of each) SENT WITH ORIGINAL COMPLETION REPORT 1/10/1997	

23. WAS WELL CORED?	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>	(Submit analysis)
WAS DST RUN?	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>	(Submit report)
DIRECTIONAL SURVEY?	NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/>	(Submit copy)

24. CASING AND LINER RECORD (Report all strings set in well)

HOLE SIZE	SIZE/GRADE	WEIGHT (#/ft.)	TOP (MD)	BOTTOM (MD)	STAGE CEMENTER DEPTH	CEMENT TYPE & NO. OF SACKS	SLURRY VOLUME (BBL)	CEMENT TOP **	AMOUNT PULLED
12.25	8.625 J55	24	0	412		G 250	53	0	
7.625	5.5 J55	15.5	0	5,866		G 405	187	2200 CBL	

RECEIVED
NOV 01 2010

25. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
2.875	4,587							

26. PRODUCING INTERVALS

FORMATION NAME	TOP (MD)	BOTTOM (MD)	TOP (TVD)	BOTTOM (TVD)
(A) GREEN RIVER	4,040	4,481	4,040	4,481
(B)				
(C)				
(D)				

27. PERFORATION RECORD

INTERVAL (Top/Bot - MD)	SIZE	NO. HOLES	PERFORATION STATUS
4,040 4,054	.42	56	Open <input checked="" type="checkbox"/> Squeezed <input type="checkbox"/>
4,062 4,072	.42	40	Open <input checked="" type="checkbox"/> Squeezed <input type="checkbox"/>
4,260 4,266	.42	24	Open <input checked="" type="checkbox"/> Squeezed <input type="checkbox"/>
4,298 4,304	.42	24	Open <input checked="" type="checkbox"/> Squeezed <input type="checkbox"/>

28. ACID, FRACTURE, TREATMENT, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL	AMOUNT AND TYPE OF MATERIAL
4040'-54' / 4062'-72'	36,300# @1#-5# ramp & 13,880# @5# sand frac. 20/40 w/324 bbls 15# delta 140 w/250 gal 15%hcl
4260'-66' / 4298'-4304'	30,500# @1#-5# ramp sand frac 20/40 w/258 bbls. 15# delta 140 w/250 gal 15% hcl
4465'-81'	29,800# @1#-5# ramp sand frac 20/40 w/243bbls. 15# delta 140 w/250 gal 15% hcl

29. ENCLOSED ATTACHMENTS:

<input type="checkbox"/> ELECTRICAL/MECHANICAL LOGS <input type="checkbox"/> SUNDRY NOTICE FOR PLUGGING AND CEMENT VERIFICATION	<input type="checkbox"/> GEOLOGIC REPORT <input type="checkbox"/> CORE ANALYSIS	<input type="checkbox"/> DST REPORT <input type="checkbox"/> DIRECTIONAL SURVEY <input type="checkbox"/> OTHER: _____
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30. WELL STATUS:

POW

31. INITIAL PRODUCTION

INTERVAL A (As shown in Item #26)

INTERVAL A (As shown in item #26)											
DATE FIRST PRODUCED: 10/27/2010		TEST DATE: 10/28/2010		HOURS TESTED: 24		TEST PRODUCTION RATES: →		OIL – BBL: 30	GAS – MCF: 75	WATER – BBL: 56	PROD. METHOD: ROD PUMP
CHOKE SIZE: 40	TBG. PRESS. 40	CSG. PRESS. 67	API GRAVITY 33.00	BTU – GAS 1	GAS/OIL RATIO 2,500	24 HR PRODUCTION RATES: →	OIL – BBL: 30	GAS – MCF: 75	WATER – BBL: 56	INTERVAL STATUS: OPEN	

INTERVAL B (As shown in Item #26)

DATE FIRST PRODUCED:		TEST DATE:		HOURS TESTED:		TEST PRODUCTION RATES: →	OIL – BBL:	GAS – MCF:	WATER – BBL:	PROD. METHOD:
CHOKE SIZE:	TBG. PRESS.	CSG. PRESS.	API GRAVITY	BTU – GAS	GAS/OIL RATIO	24 HR PRODUCTION RATES: →	OIL – BBL:	GAS – MCF:	WATER – BBL:	INTERVAL STATUS:

INTERVAL C (As shown in Item #26)

DATE FIRST PRODUCED:		TEST DATE:		HOURS TESTED:		TEST PRODUCTION RATES: →		OIL – BBL:	GAS – MCF:	WATER – BBL:	PROD. METHOD:
CHOKE SIZE:	TBG. PRESS.	CSG. PRESS.	API GRAVITY	BTU – GAS	GAS/OIL RATIO	24 HR PRODUCTION RATES: →		OIL – BBL:	GAS – MCF:	WATER – BBL:	INTERVAL STATUS:

INTERVAL D (As shown in Item #26)

DATE FIRST PRODUCED:		TEST DATE:		HOURS TESTED:		TEST PRODUCTION RATES: →	OIL – BBL:	GAS – MCF:	WATER – BBL:	PROD. METHOD:
CHOKE SIZE:	TBG. PRESS.	CSG. PRESS.	API GRAVITY	BTU – GAS	GAS/OIL RATIO	24 HR PRODUCTION RATES: →	OIL – BBL:	GAS – MCF:	WATER – BBL:	INTERVAL STATUS:
32. DISPOSITION OF GAS (Sold, Used for Fuel, Vented, Flare)										

32. DISPOSITION OF GAS (Sold, Used for Fuel, Vented, Etc.)

USED FOR FUEL

33. SUMMARY OF POROUS ZONES (Include Aquifers):

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

34. FORMATION (Log) MARKERS:

Formation	Top (MD)	Bottom (MD)	Descriptions, Contents, etc.	Name	Top (Measured Depth)
				X MARKER	3,855
				DOUGLAS CREEK	4,488
				B LIMESTONE	4,874
				CASTLE PEAK	5,432
				BASAL CARBONATE	5,842

35. ADDITIONAL REMARKS (Include plugging procedure)

SEC. 27 PERFS. CONT. 4465'-4481' @.42 DIA. 64 HOLES OPEN

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records.

NAME (PLEASE PRINT) BOYD COOKTITLE RIG REPSIGNATURE *Boyd Cook*DATE 10/28/2010

This report must be submitted within 30 days of

- completing or plugging a new well
- drilling horizontal laterals from an existing well bore
- recompleting to a different producing formation

- reentering a previously plugged and abandoned well
- significantly deepening an existing well bore below the previous bottom-hole depth
- drilling hydrocarbon exploratory holes, such as core samples and stratigraphic tests

* ITEM 20: Show the number of completions if production is measured separately from two or more formations.

** ITEM 24: Cement Top - Show how reported top(s) of cement were determined (circulated (CIR), calculated (CAL), cement bond log (CBL), temperature survey (TS)).

Send to: Utah Division of Oil, Gas and Mining
1594 West North Temple, Suite 1210
Box 145801
Salt Lake City, Utah 84114-5801

Phone: 801-538-5340

Fax: 801-359-3940

PETROGLYPH



UTE TRIBAL 17-12 RECOMPLETION

CONTINUATION OF OF PERF. INTERVALS AND FRACS.

FORM 8 SEC. 27

PERFS. CONT: 4465'-81' @ .42 DIA. 64 HOLES OPEN
ALL ABOVE PERFS. SHOT AND FRAC'D AT RECOMPLETION 10/16/2010

BELOW: ORIGINAL COMPLETION (11/11/1996) PERFS. PLUGGED BACK WITH
CIBP SET @4,650' ON 10/14/2010

C6=4692'-96' @ .34 DIA. 17 HOLES- PLUGGED BACK
D3=4970'-73' @ .34 DIA. 13 HOLES -PLUGGED BACK
E2=5482'-91' @ .42 DIA. 36 HOLES- PLUGGED BACK
E2.2=5496'-5502' @ .42 DIA. 24 HOLES- PLUGGED BACK
E2.2=5506'-13' @ .42 DIA. 28 HOLES-PLUGGED BACK

Note: All E2 perfs were re-shot 10/12/2010 @ .42 dia. 4spf deep penetrating
Perfs. were broken down with 250 gals. 15% hcl and swab tested for two days-no oil
show and minimal fluid entry into wellbore (136 total bbls. recovered-all water no oil-
swab's dry in 9 to 10 runs)

P. L. W. 10/28/10

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: INDIAN
		6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
		7. UNIT or CA AGREEMENT NAME:
1. TYPE OF WELL Oil Well	8. WELL NAME and NUMBER: UTE TRIBAL 17-12	
2. NAME OF OPERATOR: PETROGLYPH OPERATING CO	9. API NUMBER: 43013317130000	
3. ADDRESS OF OPERATOR: 960 Broadway Ave, Ste 500, Bosie, ID, 83703	PHONE NUMBER: 208 685-7674 Ext	9. FIELD and POOL or WILDCAT: ANTELOPE CREEK
4. LOCATION OF WELL FOOTAGES AT SURFACE: 2527 FSL 0612 FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSW Section: 17 Township: 05.0S Range: 03.0W Meridian: U		COUNTY: DUCHESNE
		STATE: UTAH

11.

CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input checked="" type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION	OTHER: <input style="width: 100px;" type="text"/>
<input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 10/16/2010				
<input type="checkbox"/> SPUD REPORT Date of Spud:				
<input type="checkbox"/> DRILLING REPORT Report Date:				

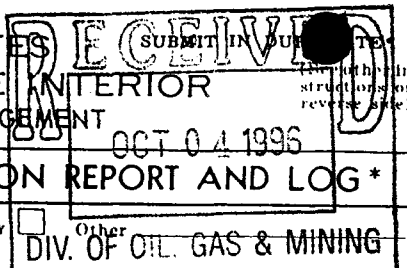
12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

On 10/16/2010 Petroglyph Operating moved a rig on the location to re-complete zones: C3@ 4,465'-4,481', B11@ 4,298'-4,304', B10@ 4,260'-4,266', B6@ 4,040'-4,054' and 4,062'-4,072'. Zone C3@ 4,465'-4,481' was fraced w/ 478 Bbls Delta 140 15# gelled fluid w/ 29,800#s of 20/40 mesh sand 1-5#ppg ramp. Zones B10@ 4,260'-4,266' and B11@ 4,298'-4,304' were fraced w/ 430 Bbls Delta 140 15# gelled fluid w/ 30,500#s of 20/40 mash sand 1-5#ppg ramp. 100% placed. Zone B6@ 4,040'-4,054' & 4,062'-4,072' was fraqcd w/ 397 Bbls Delta 140 15# gelled fluid w/ 36,300#s of 20/40 mesh sand 1-5#ppg ramp and 13,880#'s 20/40 mesh sand 6#ppg hold. All perfs were shot using Titan 3 1/8 guns with 22.7 gram charges .43HED, 4 spf, 120*phased. All isolation plugs were drilled out. Swabbed until good oil sign showed, ran in rod pump and put to pump.

Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY
 February 21, 2012

NAME (PLEASE PRINT) Rodrigo Jurado	PHONE NUMBER 435 722-5302	TITLE Regulatory & Compliance Spc
SIGNATURE N/A		DATE 2/16/2012

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT



Form approved.
Budget Bureau No. 1004-0137
Expires August 31, 1985

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other ☐
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐

2. NAME OF OPERATOR
Petroglyph Operating Company, Inc.
3. ADDRESS OF OPERATOR
P.O. Box 1839 Hutchinson, KS 67504-1839

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface SW NW 1797 FNL & 620 FWL
At top prod. interval reported below
At total depth 6113 RID

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14. PERMIT NO. 43-013-31674 DATE ISSUED

5. LEASE DESIGNATION AND SERIAL NO.
14-20-H62-4633

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Ute Indian Tribe

7. UNIT AGREEMENT NAME
14-20-H62-4650

8. FARM OR LEASE NAME
Ute Tribal

9. WELL NO.
17-05

10. FIELD AND POOL, OR WILDCAT
Antelope Creek

11. SEC. T., R., M., OR BLOCK AND SURVEY OR AREA
Sec. 17-T5S-R3W

12. COUNTY OR PARISH
Duchesne

13. STATE
Utah

15. DATE SPUDDED 7/25/96 16. DATE T.D. REACHED 8/1/96 17. DATE COMPL. (Ready to prod.) 9/3/96 18. ELEVATIONS (OF, RKB, RT, GR, ETC.)* 6002 GL 19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD 6113 RID 21. PLUG, BACK T.D., MD & TVD 6063 22. IF MULTIPLE COMPL., HOW MANY* 23. INTERVALS DRILLED BY ROTARY TOOLS CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
Green River

25. WAS DIRECTIONAL SURVEY MADE

26. TYPE ELECTRIC AND OTHER LOGS RUN
CNL, AIT CB4/GA/CCL 9-18-96

CONFIDENTIAL

27. WAS WELL CORED

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8"	24#	402	12-1/4"	250 sx class G	
5-1/2"	15.5#	6106	7-7/8"	65 sx hilift, 290 sx 10-0	RFC

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-7/8"	5591	

31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
5579-82 (13 holes)	5436-40 (20 holes)			DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
5454-58 (21 holes)	4908-12 (19 holes)			5579-82	6050 gal fluid, 19400# prop
4718-25 (29 holes)	4627-36 (37 holes)			5437-58	7350 gal fluid, 14750# prop
4477-79 (9 holes)	4242-47 (21 holes)			4908-12	3800 gal fluid, 15600# prop
4207-15 (33 holes)	4194-98 (17 holes)			4718-25	4000 gal fluid, 14100# prop

33. PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
9-10-96		2 1/2" x 1 1/2" x 16' pump				producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
9-12-96	24			47	16	53	
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)
TEST WITNESSED BY
Dave Schreiner

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records
SIGNED Angela R. Ely TITLE Administrative Operations Manager DATE 9-24-96

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*(See Instructions and Spaces for Additional Data on Reverse Side)

37. SUMMARY OF POROUS ZONES: (Show all important zones of porosity and contents thereof; cored intervals; and all drill-stem tests, including depth interval tested, cushion used, flowing and shut-in pressures, and recoveries):

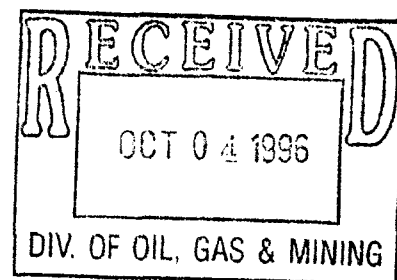
38. GEOLOGIC MARKERS

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
X Marker						
Douglas Creek						
B Limestone						
Castle Peak						
Basal Carbonate						

Ute Tribal 17-05

32. (cont.)

4627-36	4000 gal fluid, 14100# prop
4477-79	4100 gal fluid, 14000# prop
4242-47	4700 gal fluid, 11700# prop
4194-98	4900 gal fluid, 11000# prop



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STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

FORM 9

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.

1. TYPE OF WELL OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NUMBER: 1420H624650
2. NAME OF OPERATOR: Petroglyph Operating Company	6. IF INDIAN, ALLOTTEE OR TRIBE NAME: Ute Indian Tribe
3. ADDRESS OF OPERATOR: P.O. Box 607 city Roosevelt STATE UT ZIP 84066	7. UNIT or CA AGREEMENT NAME: Ute Tribal 18-01
4. LOCATION OF WELL FOOTAGES AT SURFACE: Multiple/See Below	8. WELL NAME and NUMBER: See Below
	9. API NUMBER: See Below
	10. FIELD AND POOL, OR WILDCAT: Antelope Creek

QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN:

COUNTY: Duchesne

STATE: UT

UTAH

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION		
<input type="checkbox"/> NOTICE OF INTENT (Submit in Duplicate) Approximate date work will start: _____	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> DEEPEN	<input type="checkbox"/> REPERFORATE CURRENT FORMATION
	<input type="checkbox"/> ALTER CASING	<input type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> SIDETRACK TO REPAIR WELL
	<input type="checkbox"/> CASING REPAIR	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> TEMPORARILY ABANDON
	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> TUBING REPAIR
	<input type="checkbox"/> CHANGE TUBING	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> VENT OR FLARE
<input checked="" type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only) Date of work completion: _____	<input type="checkbox"/> CHANGE WELL NAME	<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> WATER DISPOSAL
	<input type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> PRODUCTION (START/RESUME)	<input type="checkbox"/> WATER SHUT-OFF
	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input checked="" type="checkbox"/> OTHER: Facility Changes
	<input type="checkbox"/> CONVERT WELL TYPE	<input type="checkbox"/> RECOMPLETE - DIFFERENT FORMATION	

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

Well Name	API#	S/T/R	Type	Status	Entity#
Ute 17-04	430133146400S1	17/05S/03W	Oil	POW	12088
Ute 17-05	430133167400S1	17/05S/03W	Oil	POW	12088
Ute 17-12	430133171300S1	17/05S/03W	Oil	POW	12088
Ute 18-06	430133178100S1	18/05S/03W	Oil	POW	09387
Ute 18-12	430133178300S1	18/05S/03W	Oil	POW	09387

All wells were moved to the Ute Tribal 18-01 Tank Battery.

Ute 18-01 Oil POW 12245

NAME (PLEASE PRINT) Callie Peatross

TITLE Production Clerk

SIGNATURE

Callie Peatross

DATE 04-25-03

(This space for State use only)

RECEIVED


APR 28 2003

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: INDIAN
		6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
		7. UNIT or CA AGREEMENT NAME:
1. TYPE OF WELL Oil Well		8. WELL NAME and NUMBER: UTE TRIBAL 17-05
2. NAME OF OPERATOR: PETROGLYPH OPERATING CO		9. API NUMBER: 43013316740000
3. ADDRESS OF OPERATOR: 960 Broadway Avenue, Ste 500, Boise, ID, 83703		9. FIELD and POOL or WILDCAT: ANTELOPE CREEK
4. LOCATION OF WELL FOOTAGES AT SURFACE: 1797 FNL 0620 FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: SWNW Section: 17 Township: 05.0S Range: 03.0W Meridian: U		COUNTY: DUCHESNE
		STATE: UTAH
11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE	
<input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 4/1/2013	<input type="checkbox"/> ALTER CASING	
<input type="checkbox"/> SPUD REPORT Date of Spud:	<input type="checkbox"/> CASING REPAIR	
<input type="checkbox"/> DRILLING REPORT Report Date:	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	
	<input type="checkbox"/> CHANGE TUBING	
	<input type="checkbox"/> CHANGE WELL STATUS	
	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	
	<input type="checkbox"/> CONVERT WELL TYPE	
	<input type="checkbox"/> DEEPEN	
	<input type="checkbox"/> FRACTURE TREAT	
	<input type="checkbox"/> NEW CONSTRUCTION	
	<input type="checkbox"/> OPERATOR CHANGE	
	<input type="checkbox"/> PLUG AND ABANDON	
	<input type="checkbox"/> PLUG BACK	
	<input type="checkbox"/> PRODUCTION START OR RESUME	
	<input type="checkbox"/> RECLAMATION OF WELL SITE	
	<input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION	
	<input type="checkbox"/> REPERFORATE CURRENT FORMATION	
	<input type="checkbox"/> SIDETRACK TO REPAIR WELL	
	<input type="checkbox"/> TEMPORARY ABANDON	
	<input type="checkbox"/> TUBING REPAIR	
	<input type="checkbox"/> VENT OR FLARE	
	<input type="checkbox"/> WATER DISPOSAL	
	<input type="checkbox"/> WATER SHUTOFF	
	<input type="checkbox"/> SI TA STATUS EXTENSION	
	<input type="checkbox"/> WILDCAT WELL DETERMINATION	
	<input type="checkbox"/> OTHER: <input style="width: 100px;" type="text"/>	
12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. Please change this well's status to Shut In. This well will be evaluated for conversion to injection well.		
Accepted by the Utah Division of Oil, Gas and Mining FOR RECORD ONLY May 01, 2013		
NAME (PLEASE PRINT) Rodrigo Jurado	PHONE NUMBER 435 722-5302	TITLE Regulatory & Compliance Spc
SIGNATURE N/A	DATE 4/22/2013	

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

FORM 3

AMENDED REPORT ☐

APPLICATION FOR PERMIT TO DRILL						1. WELL NAME and NUMBER Ute Tribal 17-12F					
2. TYPE OF WORK DRILL NEW WELL <input checked="" type="checkbox"/> REENTER P&A WELL <input type="checkbox"/> DEEPEN WELL <input type="checkbox"/>						3. FIELD OR WILDCAT ANTELOPE CREEK					
4. TYPE OF WELL Oil Well Coalbed Methane Well: NO						5. UNIT or COMMUNITIZATION AGREEMENT NAME ANTELOPE CREEK					
6. NAME OF OPERATOR PETROGLYPH OPERATING CO						7. OPERATOR PHONE 208 685-7685					
8. ADDRESS OF OPERATOR 960 Broadway Avenue, Ste 500, Boise, ID, 83703						9. OPERATOR E-MAIL ppowell@pgei.com					
10. MINERAL LEASE NUMBER (FEDERAL, INDIAN, OR STATE) 1420H624633			11. MINERAL OWNERSHIP FEDERAL <input type="checkbox"/> INDIAN <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/>			12. SURFACE OWNERSHIP FEDERAL <input type="checkbox"/> INDIAN <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/>					
13. NAME OF SURFACE OWNER (if box 12 = 'fee')						14. SURFACE OWNER PHONE (if box 12 = 'fee')					
15. ADDRESS OF SURFACE OWNER (if box 12 = 'fee')						16. SURFACE OWNER E-MAIL (if box 12 = 'fee')					
17. INDIAN ALLOTTEE OR TRIBE NAME (if box 12 = 'INDIAN') Ute Tribe			18. INTEND TO COMMINGLE PRODUCTION FROM MULTIPLE FORMATIONS YES <input type="checkbox"/> (Submit Commingling Application) NO <input checked="" type="checkbox"/>			19. SLANT VERTICAL <input type="checkbox"/> DIRECTIONAL <input checked="" type="checkbox"/> HORIZONTAL <input type="checkbox"/>					
20. LOCATION OF WELL		FOOTAGES		QTR-QTR	SECTION	TOWNSHIP		RANGE	MERIDIAN		
LOCATION AT SURFACE		2577 FSL 598 FWL		NWSW	17	5.0 S		3.0 W	U		
Top of Uppermost Producing Zone		2200 FNL 1350 FWL		SENW	17	5.0 S		3.0 W	U		
At Total Depth		2200 FNL 1350 FWL		SENW	17	5.0 S		3.0 W	U		
21. COUNTY DUCHESNE			22. DISTANCE TO NEAREST LEASE LINE (Feet) 598			23. NUMBER OF ACRES IN DRILLING UNIT 640					
			25. DISTANCE TO NEAREST WELL IN SAME POOL (Applied For Drilling or Completed) 52			26. PROPOSED DEPTH MD: 6219 TVD: 6110					
27. ELEVATION - GROUND LEVEL 6086			28. BOND NUMBER LPM4138336			29. SOURCE OF DRILLING WATER / WATER RIGHTS APPROVAL NUMBER IF APPLICABLE 43-8342					
Hole, Casing, and Cement Information											
String	Hole Size	Casing Size	Length	Weight	Grade & Thread	Max Mud Wt.	Cement	Sacks	Yield	Weight	
Cond	20	14	0 - 54	5.0	Unknown	10.0	Class G	25	1.17	15.8	
Surf	12.25	8.625	0 - 494	24.0	J-55 ST&C	10.0	Class G	227	1.17	15.8	
Prod	7.875	5.5	0 - 6219	15.5	J-55 LT&C	10.0	Class G	473	1.92	12.5	
							Class G	338	1.46	13.4	
ATTACHMENTS											
VERIFY THE FOLLOWING ARE ATTACHED IN ACCORDANCE WITH THE UTAH OIL AND GAS CONSERVATION GENERAL RULES											
<input checked="" type="checkbox"/> WELL PLAT OR MAP PREPARED BY LICENSED SURVEYOR OR ENGINEER						<input checked="" type="checkbox"/> COMPLETE DRILLING PLAN					
<input type="checkbox"/> AFFIDAVIT OF STATUS OF SURFACE OWNER AGREEMENT (IF FEE SURFACE)						<input type="checkbox"/> FORM 5. IF OPERATOR IS OTHER THAN THE LEASE OWNER					
<input type="checkbox"/> DIRECTIONAL SURVEY PLAN (IF DIRECTIONALLY OR HORIZONTALLY DRILLED)						<input checked="" type="checkbox"/> TOPOGRAPHICAL MAP					
NAME Ed Trotter				TITLE Agent				PHONE 435 789-4120			
SIGNATURE				DATE 05/31/2013				EMAIL edtrotter@easilink.com			
API NUMBER ASSIGNED 43013522120000				APPROVAL <div style="text-align: center;">  Permit Manager </div>							

RECEIVED: June 12, 2013

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: 1420H624633
1. TYPE OF WELL Oil Well		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: Ute Tr
2. NAME OF OPERATOR: PETROGLYPH OPERATING CO		7. UNIT or CA AGREEMENT NAME: ANTELOPE CREEK
3. ADDRESS OF OPERATOR: 960 Broadway Avenue, Ste 500 , Boise, ID, 83703		8. WELL NAME and NUMBER: Ute Tribal 17-12F
4. LOCATION OF WELL FOOTAGES AT SURFACE: 2577 FSL 0598 FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSW Section: 17 Township: 05.0S Range: 03.0W Meridian: U		9. API NUMBER: 43013522120000
PHONE NUMBER: 208 685-7685 Ext		9. FIELD and POOL or WILDCAT: ANTELOPE CREEK
COUNTY: DUCHESNE		STATE: UTAH

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION		
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/>
<input type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion:			
<input checked="" type="checkbox"/> SPUD REPORT Date of Spud: 11/14/2013			
<input type="checkbox"/> DRILLING REPORT Report Date:			

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

 This well was spud on 11/14/2013 at approximately 7:30 A.M. Using a Bucket Rig (BR 2) provided by Craig's Roustabout Service, Vernal Utah, we set 60' of 16" Conductor. For additional information please contact our staff at 435-722-2531

Accepted by the
 Utah Division of
 Oil, Gas and Mining
FOR RECORD ONLY
 November 18, 2013

NAME (PLEASE PRINT) Rodrigo Jurado	PHONE NUMBER 435 722-5302	TITLE Regulatory & Compliance Spc
SIGNATURE N/A	DATE 11/15/2013	

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9			
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: 1420H624633			
1. TYPE OF WELL Oil Well		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: Ute Tr			
2. NAME OF OPERATOR: PETROGLYPH OPERATING CO		7. UNIT or CA AGREEMENT NAME: ANTELOPE CREEK			
3. ADDRESS OF OPERATOR: 960 Broadway Avenue, Ste 500, Boise, ID, 83703		8. WELL NAME and NUMBER: Ute Tribal 17-12F			
4. LOCATION OF WELL FOOTAGES AT SURFACE: 2577 FSL 0598 FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSW Section: 17 Township: 05.0S Range: 03.0W Meridian: U		9. API NUMBER: 43013522120000			
9. FIELD and POOL or WILDCAT: ANTELOPE CREEK		COUNTY: DUCHESNE			
STATE: UTAH					
11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA					
TYPE OF SUBMISSION <input checked="" type="checkbox"/> NOTICE OF INTENT Approximate date work will start: 1/6/2014 <input type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date:	TYPE OF ACTION <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input checked="" type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/> </td> </tr> </table>		<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input checked="" type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/>
<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input checked="" type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/>			
12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. Please see attached.					
Accepted by the Utah Division of Oil, Gas and Mining Date: December 30, 2013 By: <u>Derek Quist</u>					
NAME (PLEASE PRINT) Rodrigo Jurado		PHONE NUMBER 435 722-5302			
SIGNATURE N/A		TITLE Regulatory & Compliance Spc			
DATE 12/30/2013					

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

FORM 9

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals

1. TYPE OF WELL OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER _____		5. LEASE DESIGNATION AND SERIAL NUMBER: 14-20-H62-4633
2. NAME OF OPERATOR: Petroglyph Operating Company Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: Ute Indian Tribe
3. ADDRESS OF OPERATOR: P.O. Box 607 CITY: Roosevelt STATE: UT ZIP: 84066		7. UNIT or CA AGREEMENT NAME: 14-20-H62-4650
4. LOCATION OF WELL FOOTAGES AT SURFACE: 2577' FSL, 598' FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: NWSW 17 5S 3W U		8. WELL NAME and NUMBER: Ute Tribal 17-12F 9. API NUMBER: 4301352212 10. FIELD AND POOL, OR WILDCAT: Antelope Creek
		COUNTY: Duchesne STATE: UTAH

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION		
<input checked="" type="checkbox"/> NOTICE OF INTENT (Submit in Duplicate) Approximate date work will start: <u>1/6/2014</u>	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> CONVERT WELL TYPE	<input type="checkbox"/> DEEPEN <input checked="" type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> PLUG BACK <input type="checkbox"/> PRODUCTION (START/RESUME) <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> RECOMPLETE - DIFFERENT FORMATION	<input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> WATER SHUT-OFF <input type="checkbox"/> OTHER: _____
<input type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only) Date of work completion: _____			

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

On or around 1/6/2014, depending on equipment availability, Petroglyph Operating intends to perforate and fracture treat the following: 4140-52, 4155-57, 4160-64, 4367-69, 4373-75, 4381-84, 4485-93, 4632-34, 4643-48, 4687-4700, 4856-60, 4863-64, 5216-20, 5395-98, 5568-72, 5608-14, 5618-20, 5739-46 & 5855-60. We will perforate at 4 shots per foot and isolate zones using Halliburton 8K Composite Plugs. We plan complete the following stages:

5739-5860: 16,800 Gals of fluid containing 30,000#'s of sand,
 5568-5620: 17,920 Gals of fluid containing 32,000#'s of sand,
 5216-5398: 11,200 Gals of fluid containing 20,000#'s of sand,
 4632-4864: 33,600 Gals of fluid containing 60,000#'s of sand,
 4367-4493: 20,720 Gals of fluid containing 37,000#'s of sand,
 4140-4164: 50,000 Gals of fluid containing 28,000#'s of sand.

This plan is tentative and will be adjusted as needed during completion operations. Volumes and amounts of sand are only estimates, actual figures will be reported at a later date. All plugs will be drilled out and the well swabbed as necessary.

NAME (PLEASE PRINT) <u>Rodrigo Jurado</u>	TITLE <u>Regulatory Compliance Specialist</u>
SIGNATURE 	DATE <u>12/30/2013</u>

(This space for State use only)

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: 1420H624633
		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: UTE
		7. UNIT or CA AGREEMENT NAME: ANTELOPE CREEK
		8. WELL NAME and NUMBER: Ute Tribal 17-12F
1. TYPE OF WELL Oil Well		9. API NUMBER: 43013522120000
2. NAME OF OPERATOR: PETROGLYPH OPERATING CO		9. FIELD and POOL or WILDCAT: ANTELOPE CREEK
3. ADDRESS OF OPERATOR: 960 Broadway Avenue, Ste 500, Boise, ID, 83703	PHONE NUMBER: 208 685-7685 Ext	COUNTY: DUCHESNE
4. LOCATION OF WELL FOOTAGES AT SURFACE: 2577 FSL 0598 FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSW Section: 17 Township: 05.0S Range: 03.0W Meridian: U		STATE: UTAH

11.

CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION		
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION
<input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 1/23/2014	<input checked="" type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	OTHER: <input style="width: 100px;" type="text"/>	
<input type="checkbox"/> SPUD REPORT Date of Spud:			
<input type="checkbox"/> DRILLING REPORT Report Date:			

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The date of first production for this well was 01/23/2014.

Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY
 February 07, 2014

NAME (PLEASE PRINT) Rodrigo Jurado	PHONE NUMBER 435 722-5302	TITLE Regulatory & Compliance Spc
SIGNATURE N/A	DATE 2/7/2014	

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: 1420H624633
1. TYPE OF WELL Oil Well		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: UTE
2. NAME OF OPERATOR: PETROGLYPH OPERATING CO		7. UNIT or CA AGREEMENT NAME: ANTELOPE CREEK
3. ADDRESS OF OPERATOR: 960 Broadway Avenue, Ste 500 , Boise, ID, 83703		8. WELL NAME and NUMBER: Ute Tribal 17-12F
4. LOCATION OF WELL FOOTAGES AT SURFACE: 2577 FSL 0598 FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSW Section: 17 Township: 05.0S Range: 03.0W Meridian: U		9. API NUMBER: 43013522120000
PHONE NUMBER: 208 685-7685 Ext		9. FIELD and POOL or WILDCAT: ANTELOPE CREEK
COUNTY: DUCHESNE		STATE: UTAH

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input checked="" type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION	OTHER: <input style="width: 100px;" type="text"/>
<input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 1/22/2014				
<input type="checkbox"/> SPUD REPORT Date of Spud:				
<input type="checkbox"/> DRILLING REPORT Report Date:				

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

Please see attached.

**Accepted by the
 Utah Division of
 Oil, Gas and Mining
 FOR RECORD ONLY**
 June 04, 2014

NAME (PLEASE PRINT) Rodrigo Jurado	PHONE NUMBER 435 722-5302	TITLE Regulatory & Compliance Spc
SIGNATURE N/A	DATE 6/4/2014	

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

FORM 9

SUNDRY NOTICES AND REPORTS ON WELLS

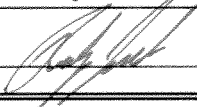
Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.

1. TYPE OF WELL OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER _____		5. LEASE DESIGNATION AND SERIAL NUMBER: 14-20-H62-4633
2. NAME OF OPERATOR: Petroglyph Operating Company Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: Ute Indian Tribe
3. ADDRESS OF OPERATOR: P.O. Box 607 CITY Roosevelt STATE UT ZIP 84066		7. UNIT or CA AGREEMENT NAME: 14-20-H62-4650
4. LOCATION OF WELL FOOTAGES AT SURFACE: 2577' FSL 598' FWL		8. WELL NAME and NUMBER: Ute Tribal 17-12F
QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: NWSW 17 5S 3W U		9. API NUMBER: 4301352212
STATE: UTAH		10. FIELD AND POOL, OR WILDCAT: Antelope Creek

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA			
TYPE OF SUBMISSION	TYPE OF ACTION		
<input type="checkbox"/> NOTICE OF INTENT (Submit in Duplicate) Approximate date work will start: _____	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> DEEPEN	<input type="checkbox"/> REPERFORATE CURRENT FORMATION
	<input type="checkbox"/> ALTER CASING	<input checked="" type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> SIDETRACK TO REPAIR WELL
	<input type="checkbox"/> CASING REPAIR	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> TEMPORARILY ABANDON
	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> TUBING REPAIR
	<input type="checkbox"/> CHANGE TUBING	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> VENT OR FLARE
<input checked="" type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only) Date of work completion: 1/22/2014	<input type="checkbox"/> CHANGE WELL NAME	<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> WATER DISPOSAL
	<input type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> PRODUCTION (START/RESUME)	<input type="checkbox"/> WATER SHUT-OFF
	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input type="checkbox"/> OTHER: _____
	<input type="checkbox"/> CONVERT WELL TYPE	<input type="checkbox"/> RECOMPLETE - DIFFERENT FORMATION	

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

On 1/3/2014 Petroglyph Operating ran GR/CBL and found ETOC @ Surface, then on 1/9/2014 perforated the following: 5855-60, 5739-46, 5618-20, 5608-14, 5568-72, 5395-98, 5216-20, 4863-64, 4856-60, 4687-4700, 4643-48, 4632-34, 4485-93, 4381-84, 4376-75, 4367-69, 4160-64, 4155-57 & 4140-52. We isolated and fracture treated the following intervals:
 5,739'-5,860': 489 Bbls of fluid containing 29,970#'s of sand,
 5,568'-5,620': 455 Bbls of fluid containing 32,200#'s of sand,
 5,216'-5,398': 369 Bbls of fluid containing 20,110#'s of sand,
 5,632'-4,864': 698 Bbls of fluid containing 60,270#'s of sand,
 4,367'-4,493': 463 Bbls of fluid containing 37,180#'s of sand,
 4,140'-4,164': 578 Bbls of fluid containing 49,280#'s of sand.
 Isolation plugs used were Halliburton 8K Composite Plugs, fluid used was Delta 140 15# gelled fluid, sand used was 20/40 Mesh Premium White Sand and plugs used were Titan 3-1/8", containing 22.7 gram charges, 0.42" EHD, 23.54" TTP @ 4 SPF @ 120* Phased. All plugs were drilled out and cleaned out to PBD, 5,990'. The well was swabbed until a good oil cut was seen, then ran a pump on 1/22/2014 and put to pump.

NAME (PLEASE PRINT) <u>Rodrigo Jurado</u>	TITLE <u>Regulatory Compliance Specialist</u>
SIGNATURE 	DATE <u>5/28/2014</u>

(This space for State use only)

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MININGAMENDED REPORT ☐ FORM 8
(highlight changes)

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. TYPE OF WELL:		OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	DRY <input type="checkbox"/>	OTHER <input type="checkbox"/>		
b. TYPE OF WORK:		NEW WELL <input checked="" type="checkbox"/>	HORIZ. LATS <input type="checkbox"/>	DEEP-EN <input type="checkbox"/>	RE-ENTRY <input type="checkbox"/>	DIFF. RESVR <input type="checkbox"/>	OTHER <input type="checkbox"/>
2. NAME OF OPERATOR: Petroglyph Operating Company, Inc.						5. LEASE DESIGNATION AND SERIAL NUMBER: 14-20-H62-4633	
3. ADDRESS OF OPERATOR: P.O. Box 607 CITY Roosevelt STATE UT Zip 84066						6. IF INDIAN, ALLOTTEE OR TRIBE NAME Ute Indian Tribe	
4. LOCATION OF WELL (FOOTAGES): AT SURFACE: 2577' FSL, 598' FWL AT TOP PRODUCING INTERVAL REPORTED BELOW: 2790' FSL, 1346' FWL SENW Sec. 17 AT TOTAL DEPTH: 2810' FSL, 1383' FWL SENW Sec. 17						7. UNIT or CA AGREEMENT NAME 14-20-H62-4650	
PHONE NUMBER: (435) 722-2531						8. WELL NAME and NUMBER: Ute Tribal 17-12F	
10. FIELD AND POOL, OR WILDCAT Antelope Creek						9. API NUMBER 4301352212	
11. QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: NWSW 17 5S 3W U						12. COUNTY Duchesne	
						13. STATE UTAH	

14. DATE SPUDED: 11/15/2013	15. DATE T.D. REACHED: 12/5/2013	16. DATE COMPLETED: 1/22/2014	ABANDONED <input type="checkbox"/>	READY TO PRODUCE <input checked="" type="checkbox"/>	17. ELEVATIONS (DF, RKB, RT, GL): 6,099' RKB
18. TOTAL DEPTH: MD 6,049 TVD 5,954	19. PLUG BACK T.D.: MD 5,900 TVD 5,807	20. IF MULTIPLE COMPLETIONS, HOW MANY? *	21. DEPTH BRIDGE MD PLUG SET: TVD		
22. TYPE ELECTRIC AND OTHER MECHANICAL LOGS RUN (Submit copy of each) SDDSN, ACTR, Cement Bond Log, Borehole Volume Plot.				23. WAS WELL CORED? NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> (Submit analysis) WAS DST RUN? NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> (Submit report) DIRECTIONAL SURVEY? NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> (Submit copy)	

24. CASING AND LINER RECORD (Report all strings set in well)

HOLE SIZE	SIZE/GRADE	WEIGHT (#/ft.)	TOP (MD)	BOTTOM (MD)	STAGE CEMENTER DEPTH	CEMENT TYPE & NO. OF SACKS	SLURRY VOLUME (BBL)	CEMENT TOP **	AMOUNT PULLED
26	16 J-55	75	0	73				0	Conductor
12.25	8.625 J-55	24	0	550		G 350	72	0	
7.875	5.5 J-55	15.5	0	6,039		G 840	270	0 CBL	

25. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
2.875	5,897							

26. PRODUCING INTERVALS

FORMATION NAME	TOP (MD)	BOTTOM (MD)	TOP (TVD)	BOTTOM (TVD)	INTERVAL (Top/Bot - MD)	SIZE	NO. HOLES	PERFORATION STATUS
(A) Green River	4,140	5,860	4,051	5,767	4,140 5,860	0.42	356	Open <input type="checkbox"/> Squeezed <input type="checkbox"/>
(B)								Open <input type="checkbox"/> Squeezed <input type="checkbox"/>
(C)								Open <input type="checkbox"/> Squeezed <input type="checkbox"/>
(D)								Open <input type="checkbox"/> Squeezed <input type="checkbox"/>

27. PERFORATION RECORD

28. ACID, FRACTURE, TREATMENT, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL	AMOUNT AND TYPE OF MATERIAL
4,140'-5,860'	3,050' Bbls of Delta 140 18# Gelled Fluid containing 229,010#'s of 20/40 Mesh Sand.

29. ENCLOSED ATTACHMENTS:

<input checked="" type="checkbox"/> ELECTRICAL/MECHANICAL LOGS	<input type="checkbox"/> GEOLOGIC REPORT	<input type="checkbox"/> DST REPORT	<input checked="" type="checkbox"/> DIRECTIONAL SURVEY
<input type="checkbox"/> SUNDRY NOTICE FOR PLUGGING AND CEMENT VERIFICATION	<input type="checkbox"/> CORE ANALYSIS	<input checked="" type="checkbox"/> OTHER: UDOGM Form 7	

30. WELL STATUS:

POW

31. INITIAL PRODUCTION

INTERVAL A (As shown in item #26)

DATE FIRST PRODUCED: 1/23/2014	TEST DATE: 3/7/2014	HOURS TESTED: 24	TEST PRODUCTION RATES: →	OIL – BBL: 83	GAS – MCF: 164	WATER – BBL: 18	PROD. METHOD: Rod Pump
CHOKE SIZE: 32/64	TBG. PRESS. 200	CSG. PRESS. 200	API GRAVITY 37.60	BTU – GAS 1	GAS/OIL RATIO 1,976	24 HR PRODUCTION RATES: →	INTERVAL STATUS: Open

INTERVAL B (As shown in item #26)

DATE FIRST PRODUCED:	TEST DATE:	HOURS TESTED:	TEST PRODUCTION RATES: →	OIL – BBL:	GAS – MCF:	WATER – BBL:	PROD. METHOD:
CHOKE SIZE:	TBG. PRESS.	CSG. PRESS.	API GRAVITY	BTU – GAS	GAS/OIL RATIO	24 HR PRODUCTION RATES: →	INTERVAL STATUS:

INTERVAL C (As shown in item #26)

DATE FIRST PRODUCED:	TEST DATE:	HOURS TESTED:	TEST PRODUCTION RATES: →	OIL – BBL:	GAS – MCF:	WATER – BBL:	PROD. METHOD:
CHOKE SIZE:	TBG. PRESS.	CSG. PRESS.	API GRAVITY	BTU – GAS	GAS/OIL RATIO	24 HR PRODUCTION RATES: →	INTERVAL STATUS:

INTERVAL D (As shown in item #26)

DATE FIRST PRODUCED:	TEST DATE:	HOURS TESTED:	TEST PRODUCTION RATES: →	OIL – BBL:	GAS – MCF:	WATER – BBL:	PROD. METHOD:
CHOKE SIZE:	TBG. PRESS.	CSG. PRESS.	API GRAVITY	BTU – GAS	GAS/OIL RATIO	24 HR PRODUCTION RATES: →	INTERVAL STATUS:

32. DISPOSITION OF GAS (Sold, Used for Fuel, Vented, Etc.)

Used for Fuel

33. SUMMARY OF POROUS ZONES (Include Aquifers):

Show all important zones of porosity and contents thereof. Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

34. FORMATION (Log) MARKERS:

Formation	Top (MD)	Bottom (MD)	Descriptions, Contents, etc.	Name	Top (Measured Depth)
				Trona	2,658
				Mahogany	2,815
				Garden Gulch	3,546
				B Marker	3,950
				X Marker	4,446
				Y Marker	4,496
				Douglas Creek	4,594
				B Lime	4,987
				Castle Peak	5,540
				Basal Carbonate	5,948

35. ADDITIONAL REMARKS (Include plugging procedure)

All Frac and Perf info is condensed. Please see NOI and Subsequent Frac Sundry for a detailed record.

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records.

NAME (PLEASE PRINT) Rodrigo JuradoTITLE Regulatory Compliance SpecialistSIGNATURE DATE 6/16/2014

This report must be submitted within 30 days of

- completing or plugging a new well
- drilling horizontal laterals from an existing well bore
- recompleting to a different producing formation
- reentering a previously plugged and abandoned well
- significantly deepening an existing well bore below the previous bottom-hole depth
- drilling hydrocarbon exploratory holes, such as core samples and stratigraphic tests

* ITEM 20: Show the number of completions if production is measured separately from two or more formations.

** ITEM 24: Cement Top – Show how reported top(s) of cement were determined (circulated (CIR), calculated (CAL), cement bond log (CBL), temperature survey (TS)).

Send to: Utah Division of Oil, Gas and Mining
1594 West North Temple, Suite 1210
Box 145801
Salt Lake City, Utah 84114-5801


Phone: 801-538-5340

Fax: 801-359-3940

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

FORM 3

AMENDED REPORT ☐

APPLICATION FOR PERMIT TO DRILL						1. WELL NAME and NUMBER Ute Tribal 17-12M					
2. TYPE OF WORK DRILL NEW WELL <input checked="" type="checkbox"/> REENTER P&A WELL <input type="checkbox"/> DEEPEN WELL <input type="checkbox"/>						3. FIELD OR WILDCAT ANTELOPE CREEK					
4. TYPE OF WELL Oil Well Coalbed Methane Well: NO						5. UNIT or COMMUNITIZATION AGREEMENT NAME ANTELOPE CREEK					
6. NAME OF OPERATOR PETROGLYPH OPERATING CO						7. OPERATOR PHONE 208 685-7685					
8. ADDRESS OF OPERATOR 960 Broadway Avenue, Ste 500, Boise, ID, 83703						9. OPERATOR E-MAIL ppowell@pgei.com					
10. MINERAL LEASE NUMBER (FEDERAL, INDIAN, OR STATE) 1420H624633				11. MINERAL OWNERSHIP FEDERAL <input type="checkbox"/> INDIAN <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/>		12. SURFACE OWNERSHIP FEDERAL <input type="checkbox"/> INDIAN <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/>					
13. NAME OF SURFACE OWNER (if box 12 = 'fee')						14. SURFACE OWNER PHONE (if box 12 = 'fee')					
15. ADDRESS OF SURFACE OWNER (if box 12 = 'fee')						16. SURFACE OWNER E-MAIL (if box 12 = 'fee')					
17. INDIAN ALLOTTEE OR TRIBE NAME (if box 12 = 'INDIAN') Ute Indian Tribe				18. INTEND TO COMMINGLE PRODUCTION FROM MULTIPLE FORMATIONS YES <input type="checkbox"/> (Submit Commingling Application) NO <input checked="" type="checkbox"/>		19. SLANT VERTICAL <input type="checkbox"/> DIRECTIONAL <input checked="" type="checkbox"/> HORIZONTAL <input type="checkbox"/>					
20. LOCATION OF WELL		FOOTAGES		QTR-QTR	SECTION	TOWNSHIP		RANGE	MERIDIAN		
LOCATION AT SURFACE		2533 FSL 585 FWL		NWSW	17	5.0 S		3.0 W	U		
Top of Uppermost Producing Zone		1740 FSL 1340 FWL		NESW	17	5.0 S		3.0 W	U		
At Total Depth		1740 FSL 1340 FWL		NESW	17	5.0 S		3.0 W	U		
21. COUNTY DUCHESNE				22. DISTANCE TO NEAREST LEASE LINE (Feet) 585		23. NUMBER OF ACRES IN DRILLING UNIT 640					
				25. DISTANCE TO NEAREST WELL IN SAME POOL (Applied For Drilling or Completed) 28		26. PROPOSED DEPTH MD: 6237 TVD: 6090					
27. ELEVATION - GROUND LEVEL 6086				28. BOND NUMBER LPM4138336		29. SOURCE OF DRILLING WATER / WATER RIGHTS APPROVAL NUMBER IF APPLICABLE 43-8342					
Hole, Casing, and Cement Information											
String	Hole Size	Casing Size	Length	Weight	Grade & Thread	Max Mud Wt.	Cement	Sacks	Yield	Weight	
Cond	20	14	0 - 54	5.0	Unknown	10.0	Class G	25	1.17	15.8	
Surf	12.25	8.625	0 - 494	24.0	J-55 ST&C	10.0	Class G	227	1.17	15.8	
Prod	7.875	5.5	0 - 6237	15.5	J-55 LT&C	10.0	Class G	465	1.92	12.5	
							Class G	350	1.46	13.4	
ATTACHMENTS											
VERIFY THE FOLLOWING ARE ATTACHED IN ACCORDANCE WITH THE UTAH OIL AND GAS CONSERVATION GENERAL RULES											
<input checked="" type="checkbox"/> WELL PLAT OR MAP PREPARED BY LICENSED SURVEYOR OR ENGINEER					<input checked="" type="checkbox"/> COMPLETE DRILLING PLAN						
<input type="checkbox"/> AFFIDAVIT OF STATUS OF SURFACE OWNER AGREEMENT (IF FEE SURFACE)					<input type="checkbox"/> FORM 5. IF OPERATOR IS OTHER THAN THE LEASE OWNER						
<input type="checkbox"/> DIRECTIONAL SURVEY PLAN (IF DIRECTIONALLY OR HORIZONTALLY DRILLED)					<input checked="" type="checkbox"/> TOPOGRAPHICAL MAP						
NAME Ed Trotter				TITLE Agent			PHONE 435 789-4120				
SIGNATURE				DATE 05/31/2013			EMAIL edtrotter@easilink.com				
API NUMBER ASSIGNED 43013522140000				APPROVAL <div style="text-align: center;">  Permit Manager </div>							

RECEIVED: June 12, 2013

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: 1420H624633
1. TYPE OF WELL Oil Well		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: Ute In
2. NAME OF OPERATOR: PETROGLYPH OPERATING CO		7. UNIT or CA AGREEMENT NAME: ANTELOPE CREEK
3. ADDRESS OF OPERATOR: 960 Broadway Avenue, Ste 500 , Boise, ID, 83703		8. WELL NAME and NUMBER: Ute Tribal 17-12M
4. LOCATION OF WELL FOOTAGES AT SURFACE: 2533 FSL 0585 FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSW Section: 17 Township: 05.0S Range: 03.0W Meridian: U		9. API NUMBER: 43013522140000
PHONE NUMBER: 208 685-7685 Ext		9. FIELD and POOL or WILDCAT: ANTELOPE CREEK
COUNTY: DUCHESNE		STATE: UTAH

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION		
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/>
<input type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion:			
<input checked="" type="checkbox"/> SPUD REPORT Date of Spud: 11/15/2013			
<input type="checkbox"/> DRILLING REPORT Report Date:			

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

 This well was spud on 11/15/2013 at approximately 8:00 A.M. Using a Bucket Rig (BR 2) provided by Craig's Roustabout Service, Vernal Utah, we set 60' of 16" Conductor. For additional information please contact our staff at 435-722-2531

Accepted by the
 Utah Division of
 Oil, Gas and Mining
FOR RECORD ONLY
 November 15, 2013

NAME (PLEASE PRINT) Rodrigo Jurado	PHONE NUMBER 435 722-5302	TITLE Regulatory & Compliance Spc
SIGNATURE N/A	DATE 11/15/2013	

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9			
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: 1420H624633			
1. TYPE OF WELL Oil Well		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: Ute In			
2. NAME OF OPERATOR: PETROGLYPH OPERATING CO		7. UNIT or CA AGREEMENT NAME: ANTELOPE CREEK			
3. ADDRESS OF OPERATOR: 960 Broadway Avenue, Ste 500, Boise, ID, 83703		8. WELL NAME and NUMBER: Ute Tribal 17-12M			
4. LOCATION OF WELL FOOTAGES AT SURFACE: 2533 FSL 0585 FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSW Section: 17 Township: 05.0S Range: 03.0W Meridian: U		9. API NUMBER: 43013522140000			
9. FIELD and POOL or WILDCAT: ANTELOPE CREEK		COUNTY: DUCHESNE			
STATE: UTAH					
11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA					
TYPE OF SUBMISSION <input checked="" type="checkbox"/> NOTICE OF INTENT Approximate date work will start: 1/9/2014 <input type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date:	TYPE OF ACTION <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input checked="" type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/> </td> </tr> </table>		<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input checked="" type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/>
<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input checked="" type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/>			
12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. Please see attached. <div style="text-align: right; margin-top: 20px;"> Accepted by the Utah Division of Oil, Gas and Mining Date: January 08, 2014 By: <u><i>Derek Quist</i></u> </div>					
NAME (PLEASE PRINT) Rodrigo Jurado		PHONE NUMBER 435 722-5302			
SIGNATURE N/A		TITLE Regulatory & Compliance Spc			
DATE 12/30/2013					

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

FORM 9

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.

1. TYPE OF WELL OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER _____		5. LEASE DESIGNATION AND SERIAL NUMBER: 14-20-H62-4633
2. NAME OF OPERATOR: Petroglyph Operating Company Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: Ute Indian Tribe
3. ADDRESS OF OPERATOR: P.O. Box 607 CITY Roosevelt STATE UT ZIP 84066		7. UNIT or CA AGREEMENT NAME: 14-20-H62-4650
4. LOCATION OF WELL FOOTAGES AT SURFACE: 2533' FSL, 585' FWL		8. WELL NAME and NUMBER: Ute Tribal 17-12M
QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: NWSW 17 5S 3W U		9. API NUMBER: 4301352214
COUNTY: Duchesne		10. FIELD AND POOL, OR WILDCAT: Antelope Creek
STATE: UTAH		

CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

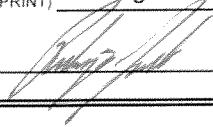
TYPE OF SUBMISSION	TYPE OF ACTION		
<input checked="" type="checkbox"/> NOTICE OF INTENT (Submit in Duplicate) Approximate date work will start: 1/9/2014	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> DEEPEN	<input type="checkbox"/> REPERFORATE CURRENT FORMATION
<input type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only) Date of work completion:	<input type="checkbox"/> ALTER CASING	<input checked="" type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> SIDETRACK TO REPAIR WELL
	<input type="checkbox"/> CASING REPAIR	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> TEMPORARILY ABANDON
	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> TUBING REPAIR
	<input type="checkbox"/> CHANGE TUBING	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> VENT OR FLARE
	<input type="checkbox"/> CHANGE WELL NAME	<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> WATER DISPOSAL
	<input type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> PRODUCTION (START/RESUME)	<input type="checkbox"/> WATER SHUT-OFF
	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input type="checkbox"/> OTHER: _____
	<input type="checkbox"/> CONVERT WELL TYPE	<input type="checkbox"/> RECOMPLETE - DIFFERENT FORMATION	

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

On or around 1/9/2014, depending on equipment availability, Petroglyph Operating intends to perforate and fracture treat the following: 4166-72, 4179-96, 4378-82, 4394-99, 4422-24, 4427-29, 4652-56, 4660-64, 4683-86, 4887-89, 4952-54, 4966-68, 5215-18, 5223-34, 5252-54, 5417-19, 5485-89, 5603-08, 5628-30, 5637-46, 5670-73, 5740-76, 5800-05, 5882-84, 5910-12. We will perforate at 4 shots per foot and isolate zones using Halliburton 8K Composite Plugs. We plan complete the following stages:

5740-5912: 14,000 Gals of fluid containing 25,000#'s of sand,
5603-5646: 25,200 Gals of fluid containing 45,000#'s of sand,
5417-5489: 6,720 Gals of fluid containing 12,000#'s of sand,
5215-5254: 25,200 Gals of fluid containing 45,000#'s of sand,
4887-4968: 6,720 Gals of fluid containing 12,000#'s of sand,
4652-4686: 16,800 Gals of fluid containing 30,000#'s of sand,
4378-4429: 16,800 Gals of fluid containing 30,000#'s of sand,
4166-4196: 33,600 Gals of fluid containing 60,000#'s of sand.

This plan is tentative and will be adjusted as needed during completion operations. Volumes and amounts of sand are only estimates, actual figures will be reported at a later date. All plugs will be drilled out and the well swabbed as necessary.

NAME (PLEASE PRINT) <u>Rodrigo Jurado</u>	TITLE <u>Regulatory Compliance Specialist</u>
SIGNATURE 	DATE <u>12/30/2013</u>

(This space for State use only)

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: 1420H624633
1. TYPE OF WELL Oil Well		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: UTE
2. NAME OF OPERATOR: PETROGLYPH OPERATING CO		7. UNIT or CA AGREEMENT NAME: ANTELOPE CREEK
3. ADDRESS OF OPERATOR: 960 Broadway Avenue, Ste 500, Boise, ID, 83703		8. WELL NAME and NUMBER: Ute Tribal 17-12M
4. LOCATION OF WELL FOOTAGES AT SURFACE: 2533 FSL 0585 FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWSW Section: 17 Township: 05.0S Range: 03.0W Meridian: U		9. API NUMBER: 43013522140000
9. FIELD and POOL or WILDCAT: ANTELOPE CREEK		COUNTY: DUCHESNE
STATE: UTAH		

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input checked="" type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION	<input type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: <div style="border: 1px solid black; padding: 2px; display: inline-block;">1/3/2014</div> <input type="checkbox"/> SPUD REPORT Date of Spud:
<input type="checkbox"/> DRILLING REPORT Report Date:				

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

Please see attached.

Accepted by the
 Utah Division of
 Oil, Gas and Mining
FOR RECORD ONLY
 June 04, 2014

NAME (PLEASE PRINT) Rodrigo Jurado	PHONE NUMBER 435 722-5302	TITLE Regulatory & Compliance Spc
SIGNATURE N/A	DATE 6/4/2014	

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

FORM 9

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.

1. TYPE OF WELL OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER _____		5. LEASE DESIGNATION AND SERIAL NUMBER 14-20-H62-4633
2. NAME OF OPERATOR: Petroglyph Operating Company Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: Ute Indian Tribe
3. ADDRESS OF OPERATOR: P.O. Box 607 CITY Roosevelt STATE UT ZIP 84066		7. UNIT or CA AGREEMENT NAME: 14-20-H62-4650
4. LOCATION OF WELL FOOTAGES AT SURFACE: 2533' FSL 585' FWL		8. WELL NAME and NUMBER: Ute Tribal 17-12M
QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: NWSW 17 5S 3W U		9. API NUMBER: 4301352214
PHONE NUMBER: (435) 722-2531		10. FIELD AND POOL, OR WILDCAT: Antelope Creek

COUNTY: Duchesne

STATE: UTAH

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> NOTICE OF INTENT (Submit in Duplicate) Approximate date work will start: _____	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> DEEPEN	<input type="checkbox"/> REPERFORATE CURRENT FORMATION	
	<input type="checkbox"/> ALTER CASING	<input checked="" type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> SIDETRACK TO REPAIR WELL	
	<input type="checkbox"/> CASING REPAIR	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> TEMPORARILY ABANDON	
	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> TUBING REPAIR	
	<input type="checkbox"/> CHANGE TUBING	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> VENT OR FLARE	
<input checked="" type="checkbox"/> SUBSEQUENT REPORT (Submit Original Form Only) Date of work completion: 1/31/2014	<input type="checkbox"/> CHANGE WELL NAME	<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> WATER DISPOSAL	
	<input type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> PRODUCTION (START/RESUME)	<input type="checkbox"/> WATER SHUT-OFF	
	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input type="checkbox"/> OTHER: _____	
	<input type="checkbox"/> CONVERT WELL TYPE	<input type="checkbox"/> RECOMPLETE - DIFFERENT FORMATION		

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

On 1/3/2014 Petroglyph Operating ran GR/CBL and found ETOC @ 110', then on 1/6/2014 perforated the following: 5910-12, 5882-84, 5800-02, 5740-46, 5670-73, 5637-46, 5628-30, 5603-08, 5485-89, 5417-19, 5252-54, 5223-34, 5215-18, 4966-68, 4952-54, 4887-89, 4683-86, 4660-64, 4652-56, 4427-29, 4422-24, 4394-99, 4378-82, 4179-96 & 4166-72. We isolated and fracture treated the following intervals:

5,740'-5,912': 518 Bbls of fluid containing 25,100#'s of sand,
5,603'-5,673': 541 Bbls of fluid containing 45,300#'s of sand,
5,417'-5,489': 313 Bbls of fluid containing 12,120#'s of sand,
5,215'-5,254': 544 Bbls of fluid containing 45,170#'s of sand,
4,887'-4,968': 280 Bbls of fluid containing 12,140#'s of sand,
4,652'-4,686': 403 Bbls of fluid containing 31,040#'s of sand,
4,378'-4,429': 394 Bbls of fluid containing 30,220#'s of sand,
4,166'-4,196': 657 Bbls of fluid containing 57,930#'s of sand.

Isolation plugs used were Halliburton 8K Composite Plugs, fluid used was Delta 140 15# gelled fluid, sand used was 20/40 Mesh Premium White Sand and plugs used were Titan 3-1/8", containing 22.7 gram charges, 0.42" EHD, 23.54" TTP @ 4 SPF @ 120* Phased. All plugs were drilled out and cleaned out to PBTD, 6,000'. The well was swabbed until a good oil cut was see, then ran a pump on 1/31/2013 and put to pump.

NAME (PLEASE PRINT) Rodrigo Jurado TITLE Regulatory Compliance Specialist
SIGNATURE  DATE 5/28/2014

(This space for State use only)

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MININGAMENDED REPORT ☐ FORM 8
(highlight changes)

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. TYPE OF WELL: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER _____		5. LEASE DESIGNATION AND SERIAL NUMBER: 14-20-H62-4633
b. TYPE OF WORK: NEW WELL <input checked="" type="checkbox"/> HORIZ. LATS. <input type="checkbox"/> DEEP-EN <input type="checkbox"/> RE-ENTRY <input type="checkbox"/> DIFF. RESVR <input type="checkbox"/> OTHER _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: Ute Indian Tribe
2. NAME OF OPERATOR: Petroglyph Operating Company, Inc.		7. UNIT or CA AGREEMENT NAME: 14-20-H62-4650
3. ADDRESS OF OPERATOR: P.O. Box 607 CITY Roosevelt STATE UT ZIP 84066		8. WELL NAME and NUMBER: Ute Tribal 17-12M
4. LOCATION OF WELL (FOOTAGES) AT SURFACE: 2533' FSL, 585' FWL AT TOP PRODUCING INTERVAL REPORTED BELOW: 1748' FSL, 1083' FWL AT TOTAL DEPTH: 1504' FSL, 1224' FWL		9. API NUMBER: 4301352214
10. FIELD AND POOL, OR WILDCAT: Antelope Creek		11. QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: NWSW 17 5S 3W U
12. COUNTY: Duchesne		13. STATE: UTAH
14. DATE SPUDDED: 11/15/2013	15. DATE T.D. REACHED: 1/28/2014	16. DATE COMPLETED: 1/31/2014
17. ELEVATIONS (DF, RKB, RT, GL): 6099' RKB		ABANDONED <input type="checkbox"/> READY TO PRODUCE <input checked="" type="checkbox"/>
18. TOTAL DEPTH: MD 6,074 TVD 5,908	19. PLUG BACK T.D.: MD 6,000 TVD 5,834	20. IF MULTIPLE COMPLETIONS, HOW MANY? *
21. DEPTH BRIDGE MD PLUG SET TVD		22. TYPE ELECTRIC AND OTHER MECHANICAL LOGS RUN (Submit copy of each) ACTR, SDDSN, Borehole Volume Plot, Cement Bond Log
23. WAS WELL CORED? NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> (Submit analysis) WAS DST RUN? NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> (Submit report) DIRECTIONAL SURVEY? NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> (Submit copy)		

24. CASING AND LINER RECORD (Report all strings set in well)

HOLE SIZE	SIZE/GRADE	WEIGHT (#/ft.)	TOP (MD)	BOTTOM (MD)	STAGE CEMENTER DEPTH	CEMENT TYPE & NO. OF SACKS	SLURRY VOLUME (BBL)	CEMENT TOP **	AMOUNT PULLED
26	16 J-55	75	0	73				0	Conductor
12.25	8.625 J-55	24	0	550		G 360	74	0	
7.875	5.5 J-55	15.5	0	6,066		G 820	263	110'	CBL

25. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
2.875	5,937							

26. PRODUCING INTERVALS

FORMATION NAME	TOP (MD)	BOTTOM (MD)	TOP (TVD)	BOTTOM (TVD)	INTERVAL (Top/Bot - MD)	SIZE	NO. HOLES	PERFORATION STATUS
(A) Green River	4,166	5,912	4,029	5,854	4,166 5,912	0.42	424	Open <input checked="" type="checkbox"/> Squeezed <input type="checkbox"/>
(B)								Open <input type="checkbox"/> Squeezed <input type="checkbox"/>
(C)								Open <input type="checkbox"/> Squeezed <input type="checkbox"/>
(D)								Open <input type="checkbox"/> Squeezed <input type="checkbox"/>

27. PERFORATION RECORD

28. ACID, FRACTURE, TREATMENT, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL	AMOUNT AND TYPE OF MATERIAL
4,166'-5,912'	3,650 Bbls of Delta 140 15# Gelled Fluid containing 259,020#'s of 20/40 Mesh Sand.

29. ENCLOSED ATTACHMENTS:

<input checked="" type="checkbox"/> ELECTRICAL/MECHANICAL LOGS	<input type="checkbox"/> GEOLOGIC REPORT	<input type="checkbox"/> DST REPORT	<input checked="" type="checkbox"/> DIRECTIONAL SURVEY
<input type="checkbox"/> SUNDRY NOTICE FOR PLUGGING AND CEMENT VERIFICATION	<input type="checkbox"/> CORE ANALYSIS	<input checked="" type="checkbox"/> OTHER: UDOGM Form 7	

30. WELL STATUS:

POW

31. INITIAL PRODUCTION

INTERVAL A (As shown in item #26)

DATE FIRST PRODUCED: 2/9/2014		TEST DATE: 2/17/2014		HOURS TESTED: 24		TEST PRODUCTION RATES: →		OIL – BBL: 104		GAS – MCF: 20		WATER – BBL: 23		PROD. METHOD: Rod Pump							
CHOKE SIZE: 28/64		TGB. PRESS. 360		CSG. PRESS. 360		API GRAVITY 39.00		BTU – GAS 1		GAS/OIL RATIO 192		24 HR PRODUCTION RATES: →		OIL – BBL: 104		GAS – MCF: 20		WATER – BBL: 23		INTERVAL STATUS: Open	

INTERVAL B (As shown in item #26)

DATE FIRST PRODUCED:		TEST DATE:		HOURS TESTED:		TEST PRODUCTION RATES: →	OIL – BBL:	GAS – MCF:	WATER – BBL:	PROD. METHOD:
CHOKE SIZE:	TBG. PRESS.	CSG. PRESS.	API GRAVITY	BTU – GAS	GAS/OIL RATIO	24 HR PRODUCTION RATES: →	OIL – BBL:	GAS – MCF:	WATER – BBL:	INTERVAL STATUS:

INTERVAL C (As shown in item #26)

DATE FIRST PRODUCED:		TEST DATE:		HOURS TESTED:		TEST PRODUCTION RATES →	OIL – BBL:	GAS – MCF:	WATER – BBL:	PROD. METHOD:
CHOKE SIZE:	TBG PRESS:	CSG PRESS:	API GRAVITY:	BTU – GAS:	GAS/OIL RATIO:	24 HR PRODUCTION RATES →	OIL – BBL:	GAS – MCF:	WATER – BBL:	INTERVAL STATUS:

INTERVAL D (As shown in item #26)

DATE FIRST PRODUCED:		TEST DATE:		HOURS TESTED:		TEST PRODUCTION RATES: →	OIL – BBL:	GAS – MCF:	WATER – BBL:	PROD. METHOD:
CHOKE SIZE:	TBG. PRESS.	CSG. PRESS.	API GRAVITY	BTU – GAS	GAS/OIL RATIO	24 HR PRODUCTION RATES: →	OIL – BBL:	GAS – MCF:	WATER – BBL:	INTERVAL STATUS:

32. DISPOSITION OF GAS (Sold, Used for Fuel, Vented, Etc.)

Used for Fuel

33. SUMMARY OF POROUS ZONES (Include Aquifers):

Show all important zones of porosity and contents thereof. Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

34. FORMATION (Log) MARKERS:

Formation	Top (MD)	Bottom (MD)	Descriptions, Contents, etc.	Name	Top (Measured Depth)
				Trona	2,660
				Mahogany	2,810
				Garden Gulch	3,551
				B Marker	3,964
				X Marker	4,476
				Y Marker	4,512
				Douglas Creek	4,623
				B Lime	5,019
				Castle Peak	5,573
				Basal Carbonate	5,983

35. ADDITIONAL REMARKS (Include plugging procedure)

All Frac and Perf info is condensed. Please see NOI and Subsequent Frac Sundry for a detailed record.

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records.

NAME (PLEASE PRINT) Rodrigo JuradoTITLE Regulatory Compliance SpecialistSIGNATURE DATE 6/16/2014

This report must be submitted within 30 days of

- completing or plugging a new well
- drilling horizontal laterals from an existing well bore
- recompleting to a different producing formation
- reentering a previously plugged and abandoned well
- significantly deepening an existing well bore below the previous bottom-hole depth
- drilling hydrocarbon exploratory holes, such as core samples and stratigraphic tests

* ITEM 20: Show the number of completions if production is measured separately from two or more formations.

** ITEM 24: Cement Top – Show how reported top(s) of cement were determined (circulated (CIR), calculated (CAL), cement bond log (CBL), temperature survey (TS)).

Send to: Utah Division of Oil, Gas and Mining
1594 West North Temple, Suite 1210
Box 145801
Salt Lake City, Utah 84114-5801

Phone: 801-538-5340

Fax: 801-359-3940

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

120134

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		3. LEASE DESIGNATION AND SERIAL NO. 14-20-H62-3513
2. NAME OF OPERATOR Coors Energy Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Ute Tribe
3. ADDRESS OF OPERATOR PO Box 467, Golden, Colorado 80402		7. UNIT AGREEMENT NAME -----
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 667'FEL, 2151'FSL, NE/4SE/4		8. FARM OR LEASE NAME Ute Tribal
14. PERMIT NO. 43-013-31180		9. WELL NO. 5-18
15. ELEVATIONS (Show whether SP, ST, OR, etc.) 6041'GL		10. FIELD AND POOL, OR WILDCAT Antelope Creek
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 18, T5S-R3W
		12. COUNTY OR PARISH Duchesne
		13. STATE Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

11/20/86 Spudded well at 11:00AM 11/20/86

11/21/86 RIH w/10 jts 8-5/8" J55 24.00# STC casing w/GS and one centralizer, landed casing at 395'. Cemented w/40 bbls gel water, 225 sx. Class G cement w/2% CACL and 1/4#/sx. celloflakes.

11/22 to present WO drilling rig until further notice.

RECEIVED
NOV 28 1986DIVISION OF
OIL, GAS & MINING

18. I hereby certify that the foregoing is true and correct

SIGNED

R. L. Martin

TITLE

V.P. O/G Operations

DATE

11/21/86

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

MINI TRIPLED VFL
(Other instructions on
reverse side)

010517

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen
Use "APPLICATION FOR PERMIT—"

RECEIVED
DEC 24 1986

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		3. LEASE DESIGNATION AND SERIAL NO. 14-20-H62-3513
2. NAME OF OPERATOR Coors Energy Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Ute Tribe
3. ADDRESS OF OPERATOR PO Box 467, Golden, Colorado 80402		7. UNIT AGREEMENT NAME ---
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 667' FEL, 2151' FSL, NE/4SE/4		8. FARM OR LEASE NAME Ute Tribal
5. PERMIT NO. 43-013-31180		9. WELL NO. 5-18
10. ELEVATIONS (Show whether OF, RT, OR, etc.) 6041' GL		10. FIELD AND POOL, OR WILDCAT Antelope Creek
		11. SEC., T., R., M., OR BLK. AND SUBDIVISION OR AREA Sec. 18, T5S-R3W
		12. COUNTY OR PARISH Duchesne
		13. STATE Utah

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETION

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

(Other)

Progress Report

(Other)

(Note: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent data, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

11/23 to
12/7/86

12/8/86 MIRU Westburne Rig #58, drilled ahead.

12/9 to
12/19/86

Drilled to TD of 6360', ran 5-1/2" 15.50# casing to 5699.82' GL, cemented casing with 250 sx. Hifill cement w/ 1/2#/sx. floreal, 900 sx. 50/50 pozmix w/2% gel, 10% salt.

Cemented second stage with 50 sx. Hifill and 1/2#/sx. floreal and 100 sx. 50/50 pozmix with 2% gel, 10% salt.

Presently, WOCT.

18. I hereby certify that the foregoing is true and correct

SIGNED

R. L. Martin
R. L. Martin

TITLE

V.P. O/G Operations

DATE

12-19-86

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONSENT OF APPROVAL IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1. TYPE OF WELL: OIL WELL ☒ GAS WELL ☒ DRY ☐ Other _____2. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. REVR. ☐ Other _____

3. NAME OF OPERATOR

Coors Energy Company

4. ADDRESS OF OPERATOR

P.O. Box 467, Golden, Colorado 80402

5. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface 667' FEL, 2151' FSL, NE/4SE/4

At top prod. interval reported below
same

At total depth

same

14. PERMIT NO. 013-

43-103-31180

DATE ISSUED

10/27/86

6. LEASE DESIGNATION AND SERIAL NO.

14-20-H62-3513

7. IF INDIAN, ALLOTTEE OR TRIBE NAME

Ute Tribe

8. UNIT AGREEMENT NAME

9. FARM OR LEASE NAME

Ute Tribal

10. WELL NO.

5-18

11. FIELD AND POOL, OR WILDCAT

Antelope Creek

12. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

Sec 18, T5S-R3W

13. COUNTY OR PARISH

Duchesne

14. STATE

Utah

15. DATE SPUDDED

11/20/86

16. DATE T.D. REACHED

12/18/86

17. DATE COMPL. (Ready to prod.)

12/28/86

18. ELEVATIONS (OF, BSR, RT, OR, ETC.)*

6041' GL

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

6360'

21. PLUG BACK T.D., MD & TVD

5659

22. IF MULTIPLE COMPL. HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

0-6360'

CABLE TOOLS

no

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

Green River 5554 to 4943

25. WAS DIRECTIONAL SURVEY MADE

no

26. TYPE ELECTRIC AND OTHER LOGS RUN

CBL, DIL, CNL

CBL GR

27. WAS WELL COILED

no

28.

CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB/FT.	DEPTH SET (MD)	MOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8"	24.00#	395'	12-1/4"	225 SX	
5-1/2"	15.50#	5700'	7-7/8"	1300 SX	

29.

LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	BACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKED SET (MD)
					2 7/8	5600	

31. PERFORATION RECORD (Interval, size and number)

5554, 53, 52, 51, 5430, 29, 28, 27, 17, 16, 15, 14, 5382, 81, 78, 77

5043, 42, 41, 31, 30, 29, 28, 12, 11, 10, 09, 08

4946, 45, 44, 43

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
5554 - 5377	135,000 20/40 and 15,000 10/20 150/ BBIs Fluid
5043 - 4943	95,000 20/40 and 15,000 10/20 1235 BBLs fluid

33.

PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)					WELL STATUS (Producing or shut-in)	
12/28/86		flowing					producing	
DATE OF TEST	HOURS TESTED	CHOKER SIZE	PROD'N. FOR TEST PERIOD	OIL—BSL	GAS—MCF.	WATER—BSL	GAS-OIL RATIO	
12/28/86	24		→	25	35	20 BLW	1400	
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BSL	GAS—MCF.	WATER—BSL	OIL GRAVITY-API (CORR.)		
		→	25	35	20 BLW			
34. DISTRIBUTION OF GAS IN LIQUID								

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

vented

TEST WITNESSED BY
JIM Simonton

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

D. S. Sprague

TITLE

Director O/G Operations

DATE

12/28/86

*(See Instructions and Spaces for Additional Data on Reverse Side)

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

SUBMITTED BY
10/1/86 (Instructions on
reverse side)

012215

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		3. LEASE DESIGNATION AND SERIAL NO. 14-20-H62-3513	
2. NAME OF OPERATOR Coors Energy Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Ute Tribe	
3. ADDRESS OF OPERATOR PO Box 467, Golden, Colorado 80402		7. UNIT AGREEMENT NAME -----	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 667' FEL, 2151' FSL, NE/SE		8. FARM OR LEASE NAME Ute Tribal	
10. PERMIT NO. 43-013-31180		9. WELL NO. 5-18	
11. ELEVATIONS (Show whether SV, RT, GA, etc.) 6041' GL		10. FIELD AND POOL, OR WILDCAT Antelope Creek	
		11. SEC., T., R., W., OR BLK. AND SURVEY OR AREA Sec. 18, T5S-R3W	
		12. COUNTY OR PARISH Duchesne	13. STATE Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐
☐
☐
☐
☐

PULL OR ALTER CASING

☐
☐
☐
☐
☐

FRACTURE TREAT

MULTIPLE COMPLETION

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
☐
☐
☐
☐

FRACTURE TREATMENT

REPAIRING WELL

☐
☐
☐
☐
☐

SHOOTING OR ACIDIZING

ALTERING CASING

(Other)

First Production

ABANDONMENT*

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Date of first production: 12/28/86

Sales from this well will be made to the following:

OIL:

Texaco Trading & Transportation
PO Box 5568
Denver, Colorado 80217

GAS:

Coors Energy Company
PO Box 467
Golden, Colorado 80402

18. I hereby certify that the foregoing is true and correct

SIGNED

R. L. Martin
R. L. Martin

TITLE V.P. O/G Operations

DATE

1-14-87

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

COMMITTEE OF APPROVAL, IF ANY:

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1. TYPE OF WELL:

OIL
WELL ☒GAS
WELL ☒DRY ☐

Other _____

2. TYPE OF COMPLETION:

NEW
WELL ☐WORK
OVER ☒DEEP-
EN ☐PLUG
BACK ☐DIFF.
REVR. ☐

Other _____

3. NAME OF OPERATOR

Coors Energy Company

4. ADDRESS OF OPERATOR

PO Box 467, Golden, Colorado 80402

5. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface

667' FEL, 2151' FSL, NE/SE

At top prod. interval reported below

same

At total depth

same

14. PERMIT NO.

43-013-31180

DATE ISSUED

10/27/86

15. DATE STUDDED

11/20/86

16. DATE T.D. REACHED

12/18/86

17. DATE COMPL. (Ready to prod.)

12/28/86

18. ELEVATIONS (OF R.R., RT., CR., ETC.)*

6041' GL

19. TOTAL DEPTH, MD & TVD

6360'

20. PLUG BACK T.D., MD & TVD

5659'

21. IF MULTIPLE COMPL. HOW MANY*

22. INTERVALS DRILLED BY

----->

ROTARY TOOLS

0-6360'

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION--TOP, BOTTOM, NAME (MD AND TVD)*

Green River Formation: 5554-4444'

25. WAS DIRECTIONAL SURVEY MADE

no

26. TYPE ELECTRIC AND OTHER LOGS RUN

CBL, DIL, CNL, GR. 3-487

27. WAS WELL CORED

no

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	MOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8"	24.00#	395'	12-1/4"	225 sx.	
5-1/2"	15.50#	5700'	7-7/8"	1300 sx.	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-7/8"	5558'	

31. PERFORATION RECORD (Interval, size and number)

5554, 53, 52, 51; 5430, 29, 28, 27, 17,
16, 15, 14; 5382, 81, 78, 77' w/1 SPF
4607-17' and 4444-49' w/1 SPF

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
5554-5377'	135,000# 20/40 sand, 15,000# 10/20 sand, 1507 BW
4444-4617'	111,000# 20/40 sand, 15,000# 12/20 sand, 1379 BW

33. PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)					WELL STATUS (Producing or shut-in)	
12/28/86		Pumping					Producing	
DATE OF TEST	HOURS TESTED	CHOKER SIZE	PROD'N. FOR TEST PERIOD	OIL—BSL.	GAS—MCF.	WATER—BSL.	GAS-OIL RATIO	
Retested 2/1/87	24		→	52	38	2	731	
FLOW, TUBING PRSG.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BSL.	GAS—MCF.	WATER—BSL.	OIL GRAVITY-API (CORR.)		
125	325	→	52	38	2	40+		

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

Sold

TEST WITNESSED BY

Jim Simonton

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

R. L. Martin

TITLE

V.P. O/G Operations

DATE

2/4/87

*(See Instructions and Spaces for Additional Data on Reverse Side)

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 23: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES			38. GEOLOGIC MARKERS				
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TOP	THICKNESS
Green River:	1502'						
Green River (Parachute Creek):	2850'						
Green River (Garden Gulch):	3730'						
Green River (Upper Douglas Creek):	4406'						

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

REVISED COPY

SERIAL NO.
14-20-H62-35136. IF INDIAN, ALLOTTEE OR TRIBE NAME
Ute Tribe

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Ute Tribal

9. WELL NO.

5-18

10. FIELD AND POOL, OR WILDCAT

Antelope Creek

11. SEC., T., R., M., OR BLOCK AND SURVEY
OR AREA

Sec. 18, T5S-R3W

12. COUNTY OR
PARISH
Duchesne13. STATE
Utah

19. ELEV. CASINGHEAD

23. WAS DIRECTIONAL
SURVEY MADE

no

25. WAS WELL CORED

no

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1. TYPE OF WELL:

OIL
WELL ☒GAS
WELL ☒DRY ☐

Other

A. TYPE OF COMPLETION:

NEW
WELL ☒WORK
OVER ☐DEEP-
EN ☐PLUG
BACK ☐DIFF.
REVR. ☐

Other

2. NAME OF OPERATOR

Coors Energy Company

3. ADDRESS OF OPERATOR

PO Box 467, Golden, Colorado 80402

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface 667' FEL, 2151' FSL, NE/4SE/4

At top prod. interval reported below
same

At total depth

same

14. PERMIT NO.

43-013-31180

DATE ISSUED

10/27/86

15. DATE STUDDER

11/20/86

16. DATE T.D. REACHED

12/18/86

17. DATE COMPL. (Ready to prod.)

12/28/86

18. ELEVATIONS (OF RER, BT, OR, ETC.)*

6041' GL

20. TOTAL DEPTH, MD & TVD

6360'

21. PLUG BACK T.D., MD & TVD

5659'

22. IF MULTIPLE COMPL.,
HOW MANY*

23. INTERVALS
DRILLED BY

ROTARY TOOLS

0-6360'

CABLE TOOLS

no

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

Green River Formation: 5554-5377'

26. TYPE ELECTRIC AND OTHER LOGS RUN

CBL, DIL, CNL, GR

23.

CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	MOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8"	24.00#	395'	12-1/4"	225 SX.	
5-1/2"	15.50#	5700'	7-7/8"	1300 SX.	

29.

LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	BACKS CEMENT*	SCREEN (MD)

30.

TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2-7/8"	5600'	

31. PERFORATION RECORD (Interval, size and number)

5554, 53, 52, 51; 5430, 29, 28, 27, 17, 16, 15, 14;
5382, 81, 78, 77

32. ACID, SHOT, FRACTURE CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
5554-5377'	135,000# 20/40 sand, 15,000# 10/20 sand, 1507 BW

33.*

PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)					WELL STATUS (Producing or shut-in)	
12/28/86		Flowing					Producing	
DATE OF TEST	MOSES TESTED	CHOKER SIZE	PROD'N. FOR TEST PERIOD	OIL—BSL	GAS—MCF.	WATER—BSL	GAS-OIL RATIO	
12/28/86	24		→	25	35	20BLW	1400	
FLOW, TUBING FROM	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BSL	GAS—MCF.	WATER—BSL	OIL GRAVITY-API (CORR.)		
		→	25	35	20 BLW			

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

Vented

TEST WITNESSED BY

Jim Simonton

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

R. L. Martin

TITLE

V.P. O/G Operations

DATE

2/4/87

(See Instructions and Spaces for Additional Data on Reverse Side)

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions. If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formations and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CURSION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES			38. GEOLOGIC MARKERS			
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Green River:	1502'					
Green River (Parachute Creek):	2850'					
Green River Garden Gulch):	3730'					
Green River (Upper Douglas Creek):	4406'					

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS, AND MINING

REVISED COPY

[REDACTED] AND SERIAL NO.

14-20-H62-3513

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Ute Tribe

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Ute Tribal

9. WELL NO.

5-18

10. FIELD AND POOL, OR WILDCAT

Antelope Creek

11. SEC., T., R., M., OR BLOCK AND SURVEY
OR AREA

Sec. 18, T5S-R3W

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

12. TYPE OF WELL:

OIL
WELL ☒GAS
WELL ☒DRY ☐

Other _____

13. TYPE OF COMPLETION:

NEW
WELL ☒WORK
OVER ☐DEEP-
EN ☐PLUG
BACK ☐DIFF.
REVEAL ☐

Other _____

2. NAME OF OPERATOR

Coors Energy Company

3. ADDRESS OF OPERATOR

PO Box 467, Golden, Colorado 80402

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface 667' FEL, 2151' FSL, NE/4SE/4

At top prod. interval reported below
same

At total depth

same

14. PERMIT NO.

43-013-31180

DATE ISSUED

10/27/86

12. COUNTY OR
PARISH

Duchesne

13. STATE

Utah

15. DATE SPUDDED

11/20/86

16. DATE T.D. REACHED

12/18/86

17. DATE COMPL. (Ready to prod.)

12/28/86

18. ELEVATIONS (OF, BBL, RT, OR, ETC.)*

6041' GL

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

6360'

21. PLUG, BACK T.D., MD & TVD

5659'

22. IF MULTIPLE COMPL.
HOW MANY*

23. INTERVALS
DRILLED BY

ROTARY TOOLS

0-6360'

CABLE TOOLS

no

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

Green River Formation: 5554-5377'

25. WAS DIRECTIONAL
SURVEY MADE

no

26. TYPE ELECTRIC AND OTHER LOGS RUN

CBL, DIL, CNL, GR

27. WAS WELL CORED

no

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8"	24.00#	395'	12-1/4"	225 sx.	
5-1/2"	15.50#	5700'	7-7/8"	1300 sx.	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	BACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-7/8"	5600'	

31. PERFORATION RECORD (Interval, size and number)

5554, 53, 52, 51; 5430, 29, 28, 27, 17, 16, 15, 14;
5382, 81, 78, 77

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
5554-5377'	135,000# 20/40 sand, 15,000# 10/20 sand, 1507 BW

33. PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)					WELL STATUS (Producing or shut-in)	
12/28/86		Flowing					Producing	
DATE OF TEST	MOSES TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL	GAS—MCF.	WATER—BBL	GAS-OIL RATIO	
12/28/86	24		→	25	35	20BLW	1400	
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL	GAS—MCF.	WATER—BBL	OIL GRAVITY-API (CORR.)		
		→	25	35	20 BLW			

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

Vented

TEST WITNESSED BY

Jim Simonton

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

R. L. Martin

TITLE

V.P. O/G Operations

DATE

2/4/87

(See Instructions and Spaces for Additional Data on Reverse Side)

STATE OF UTAH
DIVISION OF OIL, GAS AND MINING

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill new wells, deepen existing wells, or to reenter plugged and abandoned wells.
Use APPLICATION FOR PERMIT TO DRILL OR DEEPEN form for such proposals.

1. Type of Well: OIL ☒ GAS ☐ OTHER:

2. Name of Operator: PETROGLYPH OPERATING COMPANY, INC.

3. Address and Telephone Number: P. O. BOX 1807, Hutchinson, KS 67504-1807 316-665-8500

4. Location of Well

Footage: 667' FEL & 2151' FSL
CO. Sec., T., R., M.: NESE 18-T5S-R3W, U.S.M.

5. Lease Designation and Serial Number:
14-20-H62-3513

6. If Indian, Altiabee or Tribe Name:
UTE TRIBAL

7. Unit Agreement Name:
N/A

8. Well Name and Number:
Ute Tribal 5-18

9. API Well Number:
43-013-31180

10. Field and Pool, or Wildcat:
Antelope Creek Field
Green River Pool

County: DUCHESNE
State: UTAH

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

NOTICE OF INTENT (Submit in Duplicate)

- | | |
|--|---|
| <input type="checkbox"/> Abandonment | <input type="checkbox"/> New Construction |
| <input type="checkbox"/> Casing Repair | <input type="checkbox"/> Pull or Alter Casing |
| <input type="checkbox"/> Change of Plans | <input type="checkbox"/> Recompletion |
| <input type="checkbox"/> Conversion to Injection | <input type="checkbox"/> Shoot or Acidize |
| <input type="checkbox"/> Fracture Treat | <input type="checkbox"/> Vent or Flare |
| <input type="checkbox"/> Multiple Completion | <input type="checkbox"/> Water Shut-Off |
| <input checked="" type="checkbox"/> Other CHANGE OF OPERATOR | |

Approximate date of change 3-1-94

SUBSEQUENT REPORT (Submit Original Form Only)

- | | |
|--|---|
| <input type="checkbox"/> Abandonment | <input type="checkbox"/> New Construction |
| <input type="checkbox"/> Casing Repair | <input type="checkbox"/> Pull or Alter Casing |
| <input type="checkbox"/> Change of Plans | <input type="checkbox"/> Shoot or Acidize |
| <input type="checkbox"/> Conversion to Injection | <input type="checkbox"/> Vent or Flare |
| <input type="checkbox"/> Fracture Treat | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Other | |

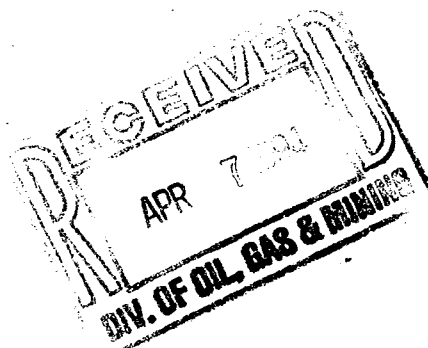
Date of work completion

Report results of Multiple Completions and Recompletions to different reservoirs on WELL COMPLETION OR RECOMPLETION AND LOG form.

* Must be accompanied by a cement verification report.

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

change of operator from Evertson Oil Company, Inc. to Petroglyph Operating Company, Inc. effective 3-1-94



13. PETROGLYPH OPERATING COMPANY, INC.

Name & Signature:

R. A. CHRISTENSEN

Title: President

Date: 2-25-94

(This space for State use only)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT" for such proposals

SUBMIT IN TRIPLICATE

5. Lease Designation and Serial No.
14-20-H62-3513

6. If Indian, Allottee or Tribe Name
Ute Indian Tribe

7. If Unit or CA, Agreement Designation

8. Well Name and No.
Ute Tribal 18-09

9. API Well No.
43-013-31180

10. Field and Pool, or Exploratory Area
Antelope Creek

11. County or Parish, State
Duchesne County, UT

1. Type of Well
☐ Oil Well ☐ Gas Well ☒ Other

2. Name of Operator
Petroglyph Operating Company, Inc.

3. Address and Telephone No.
P.O. Box 607, Roosevelt, UT 84066 (435) 722-2531

4. Location of Well (Footage, Sec., T., R., or Survey Description)

**7' FEL & 2151' FSL
NESE Sec. 18 T5S-R3W**

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other - Reperforate & acidize

☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Petroglyph Operating Company, Inc. would like to notify by subsequent report that the above referenced well had the following work performed on January 13-18, 2000.

Reperforate zone 4607-17 & 4442-48 w/ 4-spf 120 deg. phasing.
Acidize 1500 gallons 15% FE HCL w/ additives.
Squeeze well w/ 2 bbls T229 scale inhibitor & put well on Injection.

14. I hereby certify that the foregoing is true and correct

Signed *Mark Smith*

Title Operations Coordinator

Date 2-18-00

(This space for Federal or State official use)

Approved by _____ Title _____

Date _____

Conditions of Approval, if any:

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

Type of Well

☐ Oil Well ☐ Gas Well ☒ Other

Petroglyph Operating Company, Inc.

Address and Telephone No.

209 N. Highway 61 Hutchinson, KS 67502 (316) 665-8500

Location of Well (Footage, Sec., T., R., M., or Survey Description)

67' FEL & 2151' FSL
E SE Sec. 18-T5S-R3WFORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No.

14-20-H62-3513

6. If Indian, Allottee or Tribe Name

Ute Indian Tribe

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Ute Tribal 5-18

9. API Well No.

43-013-31180

10. Field and Pool, or Exploratory Area

Antelope Creek

11. County or Parish, State

Duchesne County, UT

CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐
- Notice of Intent
-
- ☐
- Subsequent Report
-
- ☐
- Final Abandonment Notice

TYPE OF ACTION

- ☐
- Abandonment
-
- ☐
- Recompletion
-
- ☐
- Plugging Back
-
- ☐
- Casing Repair
-
- ☐
- Altering Casing
-
- ☒
- Other
- begin injection

- ☐
- Change of Plans
-
- ☐
- New Construction
-
- ☐
- Non-Routine Fracturing
-
- ☐
- Water Shut-Off
-
- ☐
- Conversion to Injection
-
- ☐
- Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Enclosed please find an MIT performed on August 9, 1994 for the above referenced well. Injection commencing on 8-17-94 per EPA approval.

OCT 3

I hereby certify that the foregoing is true and correct

Signed

Title

President

Date

8-16-94

This space for Federal or State official use

App. by

Title

Date

AUG 19 1994

Conditions of approval, if any.

18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or presentations as to any matter within its jurisdiction.

*See instruction on Reverse Side

REC AUG 22 1994

94 11:22 318 865 5577
12/94 18:18 FAX 8017229

PETROGLYPH

ED FORSMAN - BLM 005/005
HUTCHINSON 002

Mechanical Integrity Test Casing/Annulus Pressure Test

U.S. Environmental Protection Agency
Underground Injection Control Program, UIC Implementation Section, SWR-DW
999 18th Street, Suite 500, Denver, CO 80202-2456

EPA Witness: NONE Date 8/9/94 Time 11:45 am/pm
Test conducted by: JAY O'DRISCOLL, O & M OILFIELD SERVICE
Others present: GARY WORKMAN, MAKER OIL

Well name	<u>UTE TRIAL 5-18</u>	EPA Number	<u></u>
Field name	<u>ANTELOPE CREEK</u>		
Location	<u>NE/SE</u> qtr qtr; <u>18</u> Section; <u>55</u> Township; <u>3W</u> Range		
Owner/Operator	<u>PETROGLYPH</u>		

Time	Test #1	Test #2	Test #3
0 min	<u>500</u> psig	<u></u> psig	<u></u> psig
5	<u>500</u>	<u></u>	<u></u>
10	<u>500</u>	<u></u>	<u></u>
15	<u>500</u>	<u></u>	<u></u>
20	<u>490</u>	<u></u>	<u></u>
25	<u>480</u>	<u></u>	<u></u>
30 min	<u>480</u>	<u></u>	<u></u>
35	<u>480</u>	<u></u>	<u></u>
40	<u>480</u>	<u></u>	<u></u>
45	<u>480</u>	<u></u>	<u></u>
50	<u></u>	<u></u>	<u></u>
55	<u></u>	<u></u>	<u></u>
60 min	<u></u>	<u></u>	<u></u>

Tubing press 0 psig psig psig

Result (circle) Pass Fail Pass Fail Pass Fail

Signature of Witness: Don Lindsay / POI

This is the front side of two sides

RECEIVED AUG 22 1994

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

Type of Well
Oil Well ☐ Gas Well ☐ Other ☒
Name of Operator

Petroglyph Operating Company, Inc.

Address and Telephone No.

6209 N. Highway 61 Hutchinson, KS 67502 (316) 665-8500

Description of Well (Footage, Sec., T., R., M., or Survey Description)

667' FEL & 2151 FSL
NE SE Sec. 18-T5S-R3W

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No.

14-20-H62-3513

6. If Indian, Allottee or Tribe Name

Ute Indian Tribe

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Ute Tribal 5-18

9. API Well No.

43-013-31180

10. Field and Pool, or Exploratory Area

Antelope Creek

11. County or Parish, State

Duchesne County, UT

CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☐ Other _____
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☒ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Further to BLM and EPA approval (Permit # UT2736-00000), this well has been converted to injection. A completed well diagram and job summary are enclosed.

OCT 3

I hereby certify that the foregoing is true and correct

by R. A. CHAPMAN

Title President,

Date 8-5-94

(For Federal or State office use)

by NOTED
actions of approval, if any:

Title _____

Date AUG 19 1994

J.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

☒ 013

009

P. 4

COMPANY		CASING	LINE	UPPER TUBING	LOWER TUBING
Petroglyph Operating		SIZE		1.5	2 3/8
WELL NAME & NUMBER Ute Tribal 5-18		WEIGHT		1.426	4.6
FIELD		GRADE		QT-700	J-55
COUNTY Duchesne		THREAD			EUE
STATE Utah		DEPTH			
DATE 08-01-94 <input type="checkbox"/> NEW <input checked="" type="checkbox"/> W.O.					

ITEM	DESCRIPTION	MAX. O.D. INCHES	MIN. I.D. INCHES	LENGTH FEET	DEPTH FEET
*	K.R.			10.00	
1	4290 FT. Of 1.5 coiled Tubing Seamed	1.50	1.348	4290.00	
2	1.50 Connector W/ 2 3/8 eu p	2.215	1.295	.55	4300.55
3	45A4 FH Pkr. W/ 20,000# Shear Ring	4.641	1.901	6.70	4307.25
4	2 3/8 X 4 Ft. Pup Jnt. J-55	3.063	1.995	4.08	4311.33
5	2 3/8 EU B X 1.660 EU IO RD. P	3.063	1.309	.54	4311.87
6	Baker 1.18 "F" Nipple	2.220	1.187	.76	4312.63
7	1.660 EU IO Rd. B x 2 3/8 EU P	2.630	1.60	.30	4312.93
8	2 3/8 EU Pump Out Plug W/ wireline Entry Guide	3.045	2.06	.60	4313.53
	Tubing Landed W/ 5,000# Tension				
	Top Perf @ 4442				
	Bottom Perf @ 4617				
	P.B.T.D. @ 5642				

PREPARED FOR Dan Lindsey		
PREPARED BY Larry L. Wadman	OFFICE Vernal, Utah	PHONE 801-789-5918



8023 NAVIGATION BOULEVARD
P.O. BOX 3048 • HOUSTON, TEXAS 77061
TELEPHONE (713) 778-9991 • TELETYPE 77061

RECEIVED AUG 22 1994

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

5. Lease Designation and Serial No.
14-20-H62-3513

6. If Indian, Allottee or Tribe Name
Ute Indian Tribe

7. If Unit or CA, Agreement Designation

14-20-H62-4650

8. Well Name and No.
Ute Tribal 5-18

9. API Well No.
43-013-31180

10. Field and Pool, or Exploratory Area
Antelope Creek

11. County or Parish, State
Duchesne County, UT

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☐ Gas Well ☒ Other

2. Name of Operator

Petroglyph Operating Company, Inc.

3. Address and Telephone No.

6209 N. Highway 61 Hutchinson, KS 67502 (316) 665-8500

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

**NESE 2151 FSL & 667 FEL
18-5S-3W**

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other **well name change**
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

In an effort to bring all of the existing wells and the anticipated wells to be drilled into a uniform numbering system, based on 40 acre locations, each well name will be changed to consist of its section location followed by the correct number of its well spot, based upon 16 wells per section.

Petroglyph Operating Company, Inc. would like to notify by subsequent report that the above referenced well name has been changed to **Ute Tribal 18-09**. This will be effective January 1, 1996.

14. I hereby certify that the foregoing is true and correct

Signed

Title

President

Date

1/25/96

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any:

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT" for such proposals

SUBMIT IN TRIPLICATE

5. Lease Designation and Serial No.

14-20-H62-3513

6. If Indian, Allottee or Tribe Name

Ute Indian Tribe

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Ute Tribal 18-09

9. API Well No.

43-013-31180

10. Field and Pool, or Exploratory Area

Antelope Creek

11. County or Parish, State

Duchesne County, UT

1. Type of Well

☐ Oil Well ☐ Gas Well ☒ Other

2. Name of Operator

Petroglyph Operating Company, Inc.

3. Address and Telephone No.

P.O. Box 607, Roosevelt, UT 84066 (435) 722-2531

4. Location of Well (Footage, Sec., T., R., or Survey Description)

7' FEL & 2151' FSL
NESE Sec. 18 T5S-R3W

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other - Reperforate & acidize

☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Petroglyph Operating Company, Inc. would like to notify by subsequent report that the above referenced well had the following work performed on January 13-18, 2000.

Reperforate zone 4607-17 & 4442-48 w/ 4-spf 120 deg. phasing.
Acidize 1500 gallons 15% FE HCL w/ additives.
Squeeze well w/ 2 bbls T229 scale inhibitor & put well on Injection.

RECEIVED

MAR 31 2000

DIVISION OF
OIL, GAS AND MINING

14. I hereby certify that the foregoing is true and correct.

Signed Wade Smith Title Operations Coordinator

Date 2-18-00

(This space for Federal or State official use)

Approved by _____ Title _____

Date _____

Conditions of Approval, if any:

WTL
5-2-00

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: 14-20-H62-3513
		6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
1. TYPE OF WELL Water Injection Well		7. UNIT or CA AGREEMENT NAME: ANTELOPE CREEK
2. NAME OF OPERATOR: PETROGLYPH OPERATING CO		8. WELL NAME and NUMBER: UTE TRIBAL 18-09
3. ADDRESS OF OPERATOR: 960 Broadway Avenue, Ste 500 , Boise, ID, 83703		9. API NUMBER: 43013311800000
4. LOCATION OF WELL FOOTAGES AT SURFACE: 2151 FSL 0667 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NESE Section: 18 Township: 05.0S Range: 03.0W Meridian: U		9. FIELD and POOL or WILDCAT: ANTELOPE CREEK
		COUNTY: DUCHESNE
		STATE: UTAH

11.

CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input checked="" type="checkbox"/> ACIDIZE	<input type="checkbox"/> ALTER CASING	<input type="checkbox"/> CASING REPAIR	
<input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 4/17/2014	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input type="checkbox"/> CHANGE TUBING	<input type="checkbox"/> CHANGE WELL NAME	
<input type="checkbox"/> SPUD REPORT Date of Spud:	<input type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> CONVERT WELL TYPE	
<input type="checkbox"/> DRILLING REPORT Report Date:	<input type="checkbox"/> DEEPEN	<input type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> NEW CONSTRUCTION	
	<input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> PLUG BACK	
	<input type="checkbox"/> PRODUCTION START OR RESUME	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION	
	<input type="checkbox"/> REPERFORATE CURRENT FORMATION	<input type="checkbox"/> SIDETRACK TO REPAIR WELL	<input type="checkbox"/> TEMPORARY ABANDON	
	<input type="checkbox"/> TUBING REPAIR	<input type="checkbox"/> VENT OR FLARE	<input type="checkbox"/> WATER DISPOSAL	
	<input type="checkbox"/> WATER SHUTOFF	<input type="checkbox"/> SI TA STATUS EXTENSION	<input type="checkbox"/> APD EXTENSION	
	<input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> OTHER	OTHER: <input type="text"/>	

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

On 4/17/2014 Petroglyph Operating rigged up a coiled tubing unit on the well referenced above to acidize the well and improve the well's injection rates. The targeted treatment interval was 4,442'-4,612'. We ran in hole through the injection tubing, established an injection rate and slowly pulled back as we spotted acid over the referenced interval.

We spotted 1,764 Gal of 15% Hcl, ran back in to the bottom of the interval and repeated spotting 1,176 Gal of Chlorine Dioxide, and ran back in again spotting in 2,142 Gal of 15% Hcl. The treatment was then flushed out into the formation with 4,095 Gallons of fresh water and the well was returned to injection.

Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY
 May 29, 2014

NAME (PLEASE PRINT) Rodrigo Jurado	PHONE NUMBER 435 722-5302	TITLE Regulatory & Compliance Spc
SIGNATURE N/A		DATE 5/27/2014

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS AND MINING						FORM 3 AMENDED REPORT				
APPLICATION FOR PERMIT TO DRILL						1. WELL NAME and NUMBER Ute Tribal 18-16J				
2. TYPE OF WORK DRILL NEW WELL <input checked="" type="checkbox"/> REENTER P&A WELL <input type="checkbox"/> DEEPEN WELL <input type="checkbox"/>						3. FIELD OR WILDCAT ANTELOPE CREEK				
4. TYPE OF WELL Oil Well Coalbed Methane Well: NO						5. UNIT or COMMUNITIZATION AGREEMENT NAME ANTELOPE CREEK				
6. NAME OF OPERATOR PETROGLYPH OPERATING CO						7. OPERATOR PHONE 208 685-7674				
8. ADDRESS OF OPERATOR 960 Broadway Ave, Ste 500, Bosie, ID, 83703						9. OPERATOR E-MAIL bwest@pgei.com				
10. MINERAL LEASE NUMBER (FEDERAL, INDIAN, OR STATE) BIA 14-20-H62-3512			11. MINERAL OWNERSHIP FEDERAL <input type="checkbox"/> INDIAN <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/>			12. SURFACE OWNERSHIP FEDERAL <input type="checkbox"/> INDIAN <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/>				
13. NAME OF SURFACE OWNER (if box 12 = 'fee')						14. SURFACE OWNER PHONE (if box 12 = 'fee')				
15. ADDRESS OF SURFACE OWNER (if box 12 = 'fee')						16. SURFACE OWNER E-MAIL (if box 12 = 'fee')				
17. INDIAN ALLOTTEE OR TRIBE NAME (if box 12 = 'INDIAN') Ute Indian Tribe			18. INTEND TO COMMINGLE PRODUCTION FROM MULTIPLE FORMATIONS YES <input type="checkbox"/> (Submit Commingling Application) NO <input checked="" type="checkbox"/>			19. SLANT VERTICAL <input type="checkbox"/> DIRECTIONAL <input checked="" type="checkbox"/> HORIZONTAL <input type="checkbox"/>				
20. LOCATION OF WELL		FOOTAGES		QTR-QTR	SECTION	TOWNSHIP	RANGE	MERIDIAN		
LOCATION AT SURFACE		900 FSL 687 FEL		SESE	18	5.0 S	3.0 W	U		
Top of Uppermost Producing Zone		1570 FSL 150 FWL		NWSW	17	5.0 S	3.0 W	U		
At Total Depth		1570 FSL 150 FWL		NWSW	17	5.0 S	3.0 W	U		
21. COUNTY DUCHESNE			22. DISTANCE TO NEAREST LEASE LINE (Feet) 687			23. NUMBER OF ACRES IN DRILLING UNIT 640				
			25. DISTANCE TO NEAREST WELL IN SAME POOL (Applied For Drilling or Completed) 783			26. PROPOSED DEPTH MD: 6145 TVD: 6009				
27. ELEVATION - GROUND LEVEL 6145			28. BOND NUMBER LP4138153			29. SOURCE OF DRILLING WATER / WATER RIGHTS APPROVAL NUMBER IF APPLICABLE 43-8342				
Hole, Casing, and Cement Information										
String	Hole Size	Casing Size	Length	Weight	Grade & Thread	Max Mud Wt.	Cement	Sacks	Yield	Weight
COND	20	14	0 - 40	5.0	Unknown	10.0	Class G	25	1.17	15.8
SURF	12.25	8.625	0 - 480	24.0	J-55 ST&C	10.0	Class G	220	1.17	15.8
PROD	7.875	5.5	0 - 6145	15.5	J-55 LT&C	10.0	Class G	467	1.92	12.5
							Class G	333	1.46	13.4
ATTACHMENTS										
VERIFY THE FOLLOWING ARE ATTACHED IN ACCORDANCE WITH THE UTAH OIL AND GAS CONSERVATION GENERAL RULES										
<input checked="" type="checkbox"/> WELL PLAT OR MAP PREPARED BY LICENSED SURVEYOR OR ENGINEER					<input checked="" type="checkbox"/> COMPLETE DRILLING PLAN					
<input type="checkbox"/> AFFIDAVIT OF STATUS OF SURFACE OWNER AGREEMENT (IF FEE SURFACE)					<input type="checkbox"/> FORM 5. IF OPERATOR IS OTHER THAN THE LEASE OWNER					
<input type="checkbox"/> DIRECTIONAL SURVEY PLAN (IF DIRECTIONALLY OR HORIZONTALLY DRILLED)					<input checked="" type="checkbox"/> TOPOGRAPHICAL MAP					
NAME Ed Trotter				TITLE Agent			PHONE 435 789-4120			
SIGNATURE				DATE 01/27/2012			EMAIL edtrotter@easilink.com			
API NUMBER ASSIGNED 43013512000000				APPROVAL Permit Manager						

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: 14-20-H62-4633
1. TYPE OF WELL Oil Well		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: Ute In
2. NAME OF OPERATOR: PETROGLYPH OPERATING CO		7. UNIT or CA AGREEMENT NAME: ANTELOPE CREEK
3. ADDRESS OF OPERATOR: 960 Broadway Avenue, Ste 500, Bosie, ID, 83703		8. WELL NAME and NUMBER: UTE TRIBAL 18-16J
4. LOCATION OF WELL FOOTAGES AT SURFACE: 0900 FSL 0687 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: SESE Section: 18 Township: 05.0S Range: 03.0W Meridian: U		9. API NUMBER: 43013512000000
9. FIELD and POOL or WILDCAT: ANTELOPE CREEK		COUNTY: DUCHESNE
STATE: UTAH		

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> ALTER CASING	<input type="checkbox"/> CASING REPAIR	
<input type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion:	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input type="checkbox"/> CHANGE TUBING	<input type="checkbox"/> CHANGE WELL NAME	
<input checked="" type="checkbox"/> SPUD REPORT Date of Spud: 11/7/2012	<input type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> CONVERT WELL TYPE	
<input type="checkbox"/> DRILLING REPORT Report Date:	<input type="checkbox"/> DEEPEN	<input type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> NEW CONSTRUCTION	
	<input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> PLUG BACK	
	<input type="checkbox"/> PRODUCTION START OR RESUME	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION	
	<input type="checkbox"/> REPERFORATE CURRENT FORMATION	<input type="checkbox"/> SIDETRACK TO REPAIR WELL	<input type="checkbox"/> TEMPORARY ABANDON	
	<input type="checkbox"/> TUBING REPAIR	<input type="checkbox"/> VENT OR FLARE	<input type="checkbox"/> WATER DISPOSAL	
	<input type="checkbox"/> WATER SHUTOFF	<input type="checkbox"/> SI TA STATUS EXTENSION	<input type="checkbox"/> APD EXTENSION	
	<input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> OTHER	OTHER: <input style="width: 100px;" type="text"/>	

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.
 We spudded this well on 11/7/2012. We set 40' of 16" Conductor.

Accepted by the
 Utah Division of
 Oil, Gas and Mining
FOR RECORD ONLY
 November 09, 2012

NAME (PLEASE PRINT) Rodrigo Jurado	PHONE NUMBER 435 722-5302	TITLE Regulatory & Compliance Spc
SIGNATURE N/A	DATE 11/8/2012	

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9			
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: 14-20-H62-4633			
1. TYPE OF WELL Oil Well		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: Ute In			
2. NAME OF OPERATOR: PETROGLYPH OPERATING CO		7. UNIT or CA AGREEMENT NAME: ANTELOPE CREEK			
3. ADDRESS OF OPERATOR: 960 Broadway Avenue, Ste 500, Bosie, ID, 83703		8. WELL NAME and NUMBER: UTE TRIBAL 18-16J			
4. LOCATION OF WELL FOOTAGES AT SURFACE: 0900 FSL 0687 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: SESE Section: 18 Township: 05.0S Range: 03.0W Meridian: U		9. API NUMBER: 43013512000000			
9. FIELD and POOL or WILDCAT: ANTELOPE CREEK		COUNTY: DUCHESNE			
STATE: UTAH					
11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA					
TYPE OF SUBMISSION <input checked="" type="checkbox"/> NOTICE OF INTENT Approximate date work will start: 1/10/2013 <input type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date:	TYPE OF ACTION <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input checked="" type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/> </td> </tr> </table>		<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input checked="" type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/>
<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input checked="" type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/>			
12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. <div style="display: flex; justify-content: space-between;"> <div style="width: 70%;"> <p>On or around 1/10/2013, depending on equipment availability, Petroglyph Operating intends to perforate and frac the following intervals: 4160-82, 4204-10, 4225-30, 4232-40, 4305-09, 4350-80, 4412-18, 4448-51, 4640-46, 4653-57, 4707-15, 4730-35, 4930-35, 4960-65, 4990-92, 5665-69, 5679-92, 5777-80, 5808-11, 5834-36, 5842-44 & 5882-91. We will perforate using 3-1/8" perf guns containing 22.7 gram charges, 0.42" EHD, 23.54" TTP @ 4 spf @ 120* phased. We will frac using Delta 140 15# gelled fluid containing 20/40 mesh sand and isolate zones with Halliburton 8K Composite Plugs.</p> </div> <div style="width: 25%; text-align: right;"> <p>Accepted by the Utah Division of Oil, Gas and Mining</p> <p>Date: December 31, 2012</p> <p>By: <u><i>Derek Quist</i></u></p> </div> </div>					
NAME (PLEASE PRINT) Rodrigo Jurado		PHONE NUMBER 435 722-5302			
SIGNATURE N/A		TITLE Regulatory & Compliance Spc			
DATE 12/31/2012					

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: 14-20-H62-4633
1. TYPE OF WELL Oil Well		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: Ute In
2. NAME OF OPERATOR: PETROGLYPH OPERATING CO		7. UNIT or CA AGREEMENT NAME: ANTELOPE CREEK
3. ADDRESS OF OPERATOR: 960 Broadway Avenue, Ste 500 , Boise, ID, 83703		8. WELL NAME and NUMBER: UTE TRIBAL 18-16J
4. LOCATION OF WELL FOOTAGES AT SURFACE: 0900 FSL 0687 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: SESE Section: 18 Township: 05.0S Range: 03.0W Meridian: U		9. API NUMBER: 43013512000000
9. FIELD and POOL or WILDCAT: ANTELOPE CREEK		COUNTY: DUCHESNE
STATE: UTAH		

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION	<input type="checkbox"/> WILDCAT WELL DETERMINATION
<input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 1/25/2013	<input checked="" type="checkbox"/> PRODUCTION START OR RESUME	OTHER: <input style="width: 100px;" type="text"/>		
<input type="checkbox"/> SPUD REPORT Date of Spud:	<input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF			
<input type="checkbox"/> DRILLING REPORT Report Date:				

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The date of first production for this well was 1/25/2013.

Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY
 February 21, 2013

NAME (PLEASE PRINT) Rodrigo Jurado	PHONE NUMBER 435 722-5302	TITLE Regulatory & Compliance Spc
SIGNATURE N/A	DATE 2/1/2013	

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: 14-20-H62-4633
		6. IF INDIAN, ALLOTTEE OR TRIBE NAME: Ute In
1. TYPE OF WELL Oil Well		7. UNIT or CA AGREEMENT NAME: ANTELOPE CREEK
2. NAME OF OPERATOR: PETROGLYPH OPERATING CO		8. WELL NAME and NUMBER: UTE TRIBAL 18-16J
3. ADDRESS OF OPERATOR: 960 Broadway Avenue, Ste 500, Boise, ID, 83703		9. API NUMBER: 43013512000000
4. LOCATION OF WELL FOOTAGES AT SURFACE: 0900 FSL 0687 FEL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: SESE Section: 18 Township: 05.0S Range: 03.0W Meridian: U		9. FIELD and POOL or WILDCAT: ANTELOPE CREEK
		COUNTY: DUCHESNE
		STATE: UTAH

11.

CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION		
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input checked="" type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: <input style="width: 100px;" type="text"/>
<input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 1/29/2013			
<input type="checkbox"/> SPUD REPORT Date of Spud:			
<input type="checkbox"/> DRILLING REPORT Report Date:			

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

On 12/28/2012 Petroglyph Operating ran GR/CBL & found ETOC @ 86'.

On 1/11/13 we then perf'd the following: 5882-91, 5842-44, 5834-36, 5808-11, 5777-80, 5679-92, 5665-69, 4990-92, 4960-65, 4930-35, 4730-35, 4707-15, 4653-57, 4640-46, 4448-51, 4412-18, 4350-80, 4305-08, 4232-40, 4225-30, 4204-10, 4160-82. Using Halliburton 8K Composite plugs for isolation, we frac'd the following: 5777-5891: 574 Bbls cont 40016#'s sand 5665-5692: 547 Bbls cont 45129#'s sand 4930-4992: 426 Bbls cont 25200#'s sand 4640-4735: 1016 Bbls cont 44857#'s sand 4412-4451: 361 Bbls cont 20000#'s sand 4305-4380: 1021 Bbls cont 85000#'s sand 4160-4249: 1060 Bbls cont 90000#'s sand We perf'd w/ Titan 3-1/8" guns cont 22.7 gram charges, 0.42"EHD, 23.54"TTP @ 4 spf @ 120* phased & frac'd w/ Delta 140 15# gelled fluid cont 20/40 mesh sand. Plugs drilled and cleaned out to 6043. We then ran pump and ptp on 1/29/2013.

Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY
 March 08, 2013

NAME (PLEASE PRINT) Rodrigo Jurado	PHONE NUMBER 435 722-5302	TITLE Regulatory & Compliance Spc
SIGNATURE N/A		DATE 3/6/2013

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

CONFIDENTIAL

AMENDED REPORT ☐
(highlight changes)

FORM 8

LEASE DESIGNATION AND SERIAL NUMBER:

14-20-H62-3513

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ OTHER ☐

b. TYPE OF WORK: NEW WELL ☒ HORIZ. LATS. ☐ DEEP-EN ☐ RE-ENTRY ☐ DIFF. RESVR. ☐ OTHER ☐

2. NAME OF OPERATOR:
Petroglyph Operating Company, Inc.

3. ADDRESS OF OPERATOR:
P.O. Box 607 CITY Roosevelt STATE UT ZIP 84066

PHONE NUMBER:
(435) 722-2531

4. LOCATION OF WELL (FOOTAGES)
AT SURFACE: 900' FSL, 687' FEL
AT TOP PRODUCING INTERVAL REPORTED BELOW: 1461' FSL, 72' FWL NWSW Sec. 17 T5S R3W
AT TOTAL DEPTH: 1505' FSL, 190' FWL NWSW Sec 17 T5S R3W

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Ute Indian Tribe

7. UNIT or CA AGREEMENT NAME
14-20-H62-4650

8. WELL NAME and NUMBER:
Ute Tribal 18-16J

9. API NUMBER:
4301351200

10. FIELD AND POOL, OR WILDCAT
Antelope Creek

11. QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN:
SESE 18 5S 3W U

12. COUNTY
Duchesne

13. STATE
UTAH

14. DATE SPUDDED: 11/7/2012 15. DATE T.D. REACHED: 11/28/2012 16. DATE COMPLETED: 1/29/2013 ABANDONED ☐ READY TO PRODUCE ☒

17. ELEVATIONS (DF, RKB, RT, GL):
6159' RKB

18. TOTAL DEPTH: MD 6,110
TVD 5,954

19. PLUG BACK T.D.: MD 6,043
TVD 5,887

20. IF MULTIPLE COMPLETIONS, HOW MANY? *

21. DEPTH BRIDGE MD
PLUG SET: TVD

22. TYPE ELECTRIC AND OTHER MECHANICAL LOGS RUN (Submit copy of each)

Spectral Density Dual Spaced Neutron, ACTR, CBL, Borehole Volume Plot

23. WAS WELL CORED? NO ☒ YES ☐ (Submit analysis)
WAS DST RUN? NO ☒ YES ☐ (Submit report)
DIRECTIONAL SURVEY? NO ☐ YES ☒ (Submit copy)

24. CASING AND LINER RECORD (Report all strings set in well)

HOLE SIZE	SIZE/GRADE	WEIGHT (#/ft.)	TOP (MD)	BOTTOM (MD)	STAGE CEMENTER DEPTH	CEMENT TYPE & NO. OF SACKS	SLURRY VOLUME (BBL)	CEMENT TOP **	AMOUNT PULLED
20	18 J-55	75	0	54				Conductor	
12.25	8.625 J-55	24	0	513		G 350	72	0	
7.875	5.5 J-55	15.5	0	6,100		G 901	280	86' CBL	

25. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
2.875	5,889							

26. PRODUCING INTERVALS

FORMATION NAME	TOP (MD)	BOTTOM (MD)	TOP (TVD)	BOTTOM (TVD)	INTERVAL (Top/Bot - MD)	SIZE	NO. HOLES	PERFORATION STATUS
(A) Green River	4,160	5,891	4,013	5,735	4,160 5,891	0.42	616	Open <input checked="" type="checkbox"/> Squeezed <input type="checkbox"/>
(B)								Open <input type="checkbox"/> Squeezed <input type="checkbox"/>
(C)								Open <input type="checkbox"/> Squeezed <input type="checkbox"/>
(D)								Open <input type="checkbox"/> Squeezed <input type="checkbox"/>

27. PERFORATION RECORD

28. ACID, FRACTURE, TREATMENT, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL	AMOUNT AND TYPE OF MATERIAL
4,160'-5,891'	5,005 Bbls of Delta 140 15# gelled fluid containing 350,202#'s of 20/40 Mesh Sand.

29. ENCLOSED ATTACHMENTS:

☒ ELECTRICAL/MECHANICAL LOGS
☐ SUNDRY NOTICE FOR PLUGGING AND CEMENT VERIFICATION

☐ GEOLOGIC REPORT
☐ CORE ANALYSIS

☐ DST REPORT ☒ DIRECTIONAL SURVEY
☒ OTHER: UDOGM Form 7

30. WELL STATUS:

POW

RECEIVED

MAR 22 2013

31. INITIAL PRODUCTION

INTERVAL A (As shown in item #26)

DATE FIRST PRODUCED: 1/25/2013	TEST DATE: 2/11/2013	HOURS TESTED: 24	TEST PRODUCTION RATES: →	OIL – BBL: 134	GAS – MCF: 29	WATER – BBL: 19	PROD. METHOD: Rod Pump
CHOKE SIZE: 34/64	TBG. PRESS. 100	CSG. PRESS. 225	API GRAVITY 37.80	BTU – GAS 1	GAS/OIL RATIO 216	24 HR PRODUCTION RATES: →	INTERVAL STATUS: Open

INTERVAL B (As shown in item #26)

DATE FIRST PRODUCED:	TEST DATE:	HOURS TESTED:	TEST PRODUCTION RATES: →	OIL – BBL:	GAS – MCF:	WATER – BBL:	PROD. METHOD:
CHOKE SIZE:	TBG. PRESS.	CSG. PRESS.	API GRAVITY	BTU – GAS	GAS/OIL RATIO	24 HR PRODUCTION RATES: →	INTERVAL STATUS:

INTERVAL C (As shown in item #26)

DATE FIRST PRODUCED:	TEST DATE:	HOURS TESTED:	TEST PRODUCTION RATES: →	OIL – BBL:	GAS – MCF:	WATER – BBL:	PROD. METHOD:
CHOKE SIZE:	TBG. PRESS.	CSG. PRESS.	API GRAVITY	BTU – GAS	GAS/OIL RATIO	24 HR PRODUCTION RATES: →	INTERVAL STATUS:

INTERVAL D (As shown in item #26)

DATE FIRST PRODUCED:	TEST DATE:	HOURS TESTED:	TEST PRODUCTION RATES: →	OIL – BBL:	GAS – MCF:	WATER – BBL:	PROD. METHOD:
CHOKE SIZE:	TBG. PRESS.	CSG. PRESS.	API GRAVITY	BTU – GAS	GAS/OIL RATIO	24 HR PRODUCTION RATES: →	INTERVAL STATUS:

32. DISPOSITION OF GAS (Sold, Used for Fuel, Vented, Etc.)

Used on Lease

33. SUMMARY OF POROUS ZONES (Include Aquifers):

Show all important zones of porosity and contents thereof. Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

34. FORMATION (Log) MARKERS:

Formation	Top (MD)	Bottom (MD)	Descriptions, Contents, etc.	Name	Top (Measured Depth)
				Trona	2,289
				Mahogany	2,551
				Garden Gulch	3,600
				B Marker	4,018
				X Marker	4,528
				Y Marker	4,562
				Douglas Creek	4,671
				B Lime	5,064
				Castle Peak	5,613
				Basal Carbonate	6,026

35. ADDITIONAL REMARKS (Include plugging procedure)

All Frac and Perf info is condensed. Please see NOI and Subsequent Frac Sundry for detailed record.

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records.

NAME (PLEASE PRINT) Rodrigo JuradoTITLE Regulatory Compliance SpecialistSIGNATURE DATE 3/18/13

This report must be submitted within 30 days of

- completing or plugging a new well
- drilling horizontal laterals from an existing well bore
- recompleting to a different producing formation

- reentering a previously plugged and abandoned well
- significantly deepening an existing well bore below the previous bottom-hole depth
- drilling hydrocarbon exploratory holes, such as core samples and stratigraphic tests

* ITEM 20: Show the number of completions if production is measured separately from two or more formations.

** ITEM 24: Cement Top – Show how reported top(s) of cement were determined (circulated (CIR), calculated (CAL), cement bond log (CBL), temperature survey (TS)).

Send to: Utah Division of Oil, Gas and Mining
1594 West North Temple, Suite 1210
Box 145801
Salt Lake City, Utah 84114-5801

Phone: 801-538-5340

Fax: 801-359-3940